No. C 111062		Due no later than Jun 30, 2018	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. SHENANIGANS INC. C/O KATHLEEN ROMA CPA 776 E RIVERSIDE DR STE 240 EAGLE ID 83616		KATHLEEN ROMA 776 E RIVERSIDE DR STE 240 EAGLE ID 83616 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busin		ess Addresses of President, Secretary, and Directors	. Treasurer (optional).			
Office Held	Name	Street or PO Address		City	State	Country	Postal Code
PRESIDENT	JASON KOV	AC 1119 E STATE ST		BOISE	ID	USA	83712
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Jason Kovac		Date: 05/11/2018			
C 111062		Name (type or print): Jason Kovac	Title: President				
Processed 05/11/2018	* Electronically provided signatures are accepted as original signatures.						