



## **Idaho Corporation Reinstatement Form**

File online at: sosbiz.idaho.gov

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Return completed form to lidaho Secretary of State Attn: Reinstatements 450 North 4th Street

|                                  | Reinstateme                           | Boise, ID 83720                                    | 2  |                  |
|----------------------------------|---------------------------------------|--|--|------------------|
|                                  |                                       |  | Phone: (208) 334-2300                                  | 2                |
| SOS Control Number: 160404       |                                       | Filing Status: Inactive-Dissolv                    | •  | 2                |
| General Business Corporation (D) |                                       | Date Formed: 06/03/1974                            | Formation Locale: ID                                   | 021              |
| Name and Ma                      | ailing Address:                       | (1)  | Add or Change Mailing Address:                         |                  |
| 7 NORTH, IN                      | C.                                    |  |  | ü                |
| PO BOX 7784                      |                                       |  |  | <b>2</b>         |
| BOISE, ID 83                     | 3707-1784                             |  |  | _                |
|                                  |                                       |  |  | PM               |
| Registered A                     | gent (RA) and Registe                 | ered Office (RO) Address:                          | Change RA and/or RO Address:                           | Received         |
| HOWARD C GOUL                    |                                       |  | Change for and/or NO Address.                          | Ŭ                |
| 463W W ARIZONA LN                |                                       |  |  | Ë                |
| BOISE, ID 83706                  |                                       |  |  | <b>₹</b>         |
|                                  |                                       |  |  | <u>Ā</u>         |
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|                                  | Note: The Re                          | gistered Office address must be a physical lo      | daho address (no postal box).                          | 4                |
| (3) New Regis                    | stered Agent (RA) Sig                 | nature:  |  | <u>U_</u>        |
|                                  |                                       |  | above, the new agent must sign here to accept the appo | ointment.        |
| (4) Corporations:                | : Enter names and business            | addresses (with zip code) of the President, Vice   | President, Secretary, Treasurer.                       | <b>⊕</b><br>Ω    |
| Title                            | Name                                  | Business Address                                   | City, State, Zip                                       | Ω̈́              |
| Mes                              | HUNCARA                               | Macla 1 1 1 Bex 77                                 | 84 130159 II 891                                       | 0/0              |
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| (5) Decret (5)                   |                                       |  |  | <u> </u>         |
|                                  | ectors names and dusiness ad          | Idress (with zip code). Attach additional sheet if |  | <u>Q</u>         |
| Name                             | 110                                   | Business Address                                   | City, State, Zip                                       | · 7 801          |
| 11000                            | Mystl ( 150a)                         | 107 7/39 DO150                                     | (370) /30/se, J-1/87                                   | // <del>gt</del> |
|                                  |                                       | 4  |  | <del></del>      |
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|                                  | 41 0                                  | 1  |  | Ď                |
| (5) Signature:                   | Haumal P                              | Soul (6)   | Date: 9-9-9-1/   | D                |
| (7) Type/Print Na                | Harris Harris                         |  | Frank Pradical   | <u>=</u> _       |