No. C 180173		Due no later than Sep 30, 2010 Annual Report Form 1. Mailing Address: Correct in this box if needed. BREAUX, INC. AMANDA B. GRAY 3278 MEADOW RIDGE LANE TWIN FALLS ID 83301 USA		2. Registered Ag	2. Registered Agent and Address (NO PO BOX) AMANDA B GRAY 3278 MEADOW RIDGE LANE TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF				3278 MEADO\ TWIN FALLS				
4. Corporations: Enter Nam		ess Addresses o	f President, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
	MIKE E GRA AMANDA B.		3278MEADOW RIDGE LN 3278 MEADOW RIDGE LN	TWIN FALLS TWIN FALLS	ID ID	USA USA	83301 83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: A		Date: 10/07/2010				
C 180173		Name (type		Title: President				
Processed 10/07/2010		* Electronically	provided signatures are accepted as original	signatures.				