

FILED EFFECTIVE

REINSTATEMENT

No. C 138703	Annual Report Form ADMIN DISSOLVED 07/08/2004		2. Registered Agent and Office NOT A P.O. BOX																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	1. Mailing Address - Contact Name (Last, First, Middle Initial) ELABED, INC. ZAHE MA. ELABED 1740 HOOPE AVE 1480 N Woodruff Ave		ZAHE MA ELABED 1740 HOOPE AVE 1480 N Woodruff Ave IDAHO FALLS, ID 88404 83401																			
	IDAHO FALLS, ID 88404 83401		3. New registered agent signature																			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one) <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>MOHAMMAD ELABED</td> <td>BOX 2945</td> <td>IDAHO FALLS</td> <td>ID</td> <td>83401</td> </tr> <tr> <td>VP/SEC/TRES</td> <td>AMANAH ELABED</td> <td>BOX 2945</td> <td>IDAHO FALLS</td> <td>ID</td> <td>83401</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	PRESIDENT	MOHAMMAD ELABED	BOX 2945	IDAHO FALLS	ID	83401	VP/SEC/TRES	AMANAH ELABED	BOX 2945	IDAHO FALLS	ID	83401
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5. Organized under the laws of: IDAHO C 138703		6. Signature <i>ZMA Elabed</i> Date <i>10-20-05</i> Name (Typed or Printed) <i>Mohammad A Elabed</i> Title <i>pres</i>																				

Issued 10/20/2005 by CLH