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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------------------------------|---------|-------------|--|
| No. <b>C 172033</b>                                                                                                                                    |                 | <b>Due no later than Mar 31, 2016</b>                                                                                                                                                                  |       | 2. Registered Agent and Address <b>(NO PO BOX)</b>    |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                 | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>BURTONS LUXURY BATH & DELUXE KITCHENS, INC.<br>BURTON FRIESZ<br>5233 N. TURRET WAY<br>BOISE ID 83703 |       | BURTON FRIESZ<br>5233 N. TURRET WAY<br>BOISE ID 83703 |         |             |  |
|                                                                                                                                                        |                 |                                                                                                                                                                                                        |       | 3. <u>New</u> Registered Agent Signature:*            |         |             |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                 |                                                                                                                                                                                                        |       |                                                       |         |             |  |
| Office Held                                                                                                                                            | Name            | Street or PO Address                                                                                                                                                                                   | City  | State                                                 | Country | Postal Code |  |
| PRESIDENT                                                                                                                                              | BURTON C FRIESZ | 5233 N. TURRET WAY                                                                                                                                                                                     | BOISE | ID                                                    | USA     | 83703       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 172033</b>                                                                                          |                 | 6. Annual Report must be signed.*<br>Signature: Burton C. friesz<br>Name (type or print): Burton C. friesz<br>Date: 01/25/2016<br>Title: President                                                     |       |                                                       |         |             |  |
| Processed 01/25/2016                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                                                              |       |                                                       |         |             |  |