No. C 160158	Due no later than Apr 30, 2012		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form 1. Mailing Address: Correct in this box if needed. T. BROOK SUMMERS, P.C. THOMAS BROOK SUMMERS 4731 E MAJESTIC VIEW DR AMMON ID 83406 USA			THOMAS BROOK SUMMERS 108 N 3500 E			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			RIGBY ID 83442 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names and Bus	iness Addresses of P	resident, Secretary, and Directors. Treasur	rer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY HEIDI SUN PRESIDENT THOMAS	IMERS 3 SUMMERS	4731 E MAJESTIC VIEW DR 4731 E MAJESTIC VIEW DR	IDAHO FALLS AMMON	ID ID	USA USA	83406 83406	
5. Organized Under the Laws of: 6. Annual Rep		must be signed.*					
ID Signati			Date: 05	Date: 05/08/2012			
C 160158	Name (type or	Name (type or print): Bs		Title: President			
Processed 05/08/2012	* Electronically provided signatures are accepted as original signatures.						