No. C 196943		Due no later than Dec 31, 2017		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		ROBERT R DECLOSS 6775 E GREENS DR NAMPA ID 83687 3. New Registered Agent Signature:*				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CAGES PLUS, INC. ROBERT R DECLOSS 6775 E GREENS DR NAMPA ID 83687						
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Na	ames and Busin	ess Addresses of Preside	nt, Secretary, and Directors. Tre	easurer (optional).			
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
VICE PRESIDENT SECRETARY			801 E SAN PEDRO ST 6775 E GREENS DR		MERIDIAN NAMPA	ID ID	USA USA	83646 83687
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 196943		Signature: Robert R DeCloss			Date: 10/31/2017			
		Name (type or print): Robert R DeCloss			Title: President			
Processed 10/31/2017		* Electronically provided	signatures are accepted as origi	inal signa	atures.			