No. C 40921		Annual Report Form		2. Registered Age	2. Registered Agent and Address (NO PO BOX) NEL CARVER 1668 APPALOOSA MOSCOW ID 83843 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE				1660 ADDALOO				
		1. Mailing Address: Correct in this box if needed. CHATCOLAB, INC. BOB CARVER 1668 APPALOOSA RD MOSCOW ID 83843 USA						
				3. <u>New</u> Registered				
4. Corporations: Enter	Names and Busin	ess Addresses of Presid	ent, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY PRESIDENT TREASURER	RANDEE SOI MARIANNE E ROBERT D.	BURTON	3188 N 400 W 153 BEESON RD 1668 APPALOOSA RD	PLEASANT VIEW SEQUIM MOSCOW	UT WA ID	USA USA USA	84414 98382 83843	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: ROBERT D. CARVER Date			Date: 0	3/19/2018		
C 40921		Name (type or print		Title: TREASURER				
Processed 03/19/2018		* Electronically provide	d signatures are accepted as origina	al signatures.				