

No. C 187655	Due no later than Jun 30, 2011 Annual Report Form	2. Registered Agent and Office (NOT A P.O. BOX) CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 <i>Mary T. Decker</i> 3307 Oregon Trail Dr E Kimberly ID 83341																																
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. DECKER GLOBAL SOLUTIONS, INC MARY T DECKER 3307 OREGON TRAIL DR E KIMBERLY ID 83341	3. <u>New</u> Registered Agent Signature. <i>Mary T. Decker</i>																																
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.																																		
<table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Mary T. Decker</td> <td>3307 Oregon Trail Dr E</td> <td>Kimberly</td> <td>ID</td> <td>Twin Falls</td> <td>83341</td> </tr> <tr> <td>Secretary</td> <td>Mary T. Decker</td> <td>3307 Oregon Trail Dr. E</td> <td>Kimberly</td> <td>ID</td> <td>Twin Falls</td> <td>83341</td> </tr> <tr> <td>Director</td> <td>Mary T. Decker</td> <td>3307 Oregon Trail Dr E</td> <td>Kimberly</td> <td>ID</td> <td>Twin Falls</td> <td>83341</td> </tr> </tbody> </table>	Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Mary T. Decker	3307 Oregon Trail Dr E	Kimberly	ID	Twin Falls	83341	Secretary	Mary T. Decker	3307 Oregon Trail Dr. E	Kimberly	ID	Twin Falls	83341	Director	Mary T. Decker	3307 Oregon Trail Dr E	Kimberly	ID	Twin Falls	83341						
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5. Organized Under the Laws of: IDAHO C 187655	6. Signature: <i>Mary T. Decker</i> Date: <i>6-24-11</i> Name (type or print): <i>Mary T. Decker Shareholder</i> Title: <i>Director</i>																																	
Issued 06/21/2011 by SLD 125077																																		

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

Block 3: Only a new registered agent must sign in Block 3.