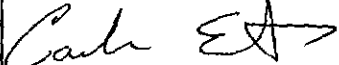



No. C 176083	Reinstatement Annual Report Form ADMIN DISSOLVED 03/08/2011		2. Registered Agent and Office (NOT A P.O. BOX) CARLOS ESTRADA 395 Linden Dr. 395 Linden Dr. IDAHO FALLS ID 83401												
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. CARLOS' PAINTING INC CARLOS ESTRADA 395 Linden Dr. 395 Linden Dr. IDAHO FALLS ID 83401 Idaho Falls, ID 83401														
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.		3. <u>New</u> Registered Agent Signature. 													
		<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/owner</td> <td>Carlos Estrada</td> <td>395 Linden Dr.</td> <td>Idaho Falls, ID</td> <td>USA</td> <td></td> <td>83401</td> </tr> </tbody> </table>		Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President/owner	Carlos Estrada	395 Linden Dr.	Idaho Falls, ID	USA
Office Held	Name	Street or PO Address	City	State	Country	Postal Code									
President/owner	Carlos Estrada	395 Linden Dr.	Idaho Falls, ID	USA		83401									
5. Organized Under the Laws of: IDAHO C 176083	6. Signature:  Name (type or print): Carlos Estrada Date: 5-31-12 Title: Owner														

Issued 05/25/2012 by LJC

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.

Block 4: Enter names and business addresses of president, secretary, and directors. **Note:** **DO NOT** put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1. If more space is needed please add an attachment.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.

**** The image of this form will be available on the internet once it has been filed. DO NOT enter Social Security numbers.**

If the corporation is no longer doing business in Idaho, you may file the appropriate form. Forms are available on the website at www.sos.idaho.gov. However, if no timely annual report is filed, administrative action will be taken, at no cost to the corporation to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.