No. <b>C</b> 186280	Reinstatement Annual Report Form ADMIN DISSOLVED 05/09/2012	2. Registered Agent and Office (NOT A P.O. BOX) BENJAMIN T MADSEN 520 N 800 E PRESTON ID 83263
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.  MADSEN MECHANICAL, INC. BENJAMIN T MADSEN 520 N 800 E PRESTON ID 83263	
reinstatement fee due: \$30.00		3. <u>New</u> Registered Agent Signature.
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.  Office Held Name Street or PO Address City State Country Postal Code PRESIDENT PENGUNIN MUCHAN TROWN SOUR PRESIDENT ID USA 832403 SECYETURY ALEXA MUCHAN TROWN SOUR PRESIDENT ID USA 832403		
5. Organized Under the Lav IDAHO C 186280	No of: 6. Signature:  Signature:  Name (type or print):  Benjamin T. Mac	Date: 7/9/12 Title: Pres.
SECOND CONTRACTOR OF INSTRU		

## 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