No. C 174139	Due no later than Jul 31, 2018	2. Registered /	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	1000 August 200 August	CLIFFORD D HANKS			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed. 1700 OVERLAND AVE BURLEY ID 83318					
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	NETWORK INTERPRETING SERVICE INC. CLIFFORD HANKS PO BOX 145	BOKEET ID	3. New Registered Agent Signature:*			
	TWIN FALLS ID 83303	3. <u>New</u> Registe				
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT CLIFFORD HANKS 1700 OVERLAND AVE		BURLEY	ID	USA	83318	
5. Organized Under the Laws of:	6. Annual Report must be signed.*					
ID	Signature: JEREMY GOODING		Date: 05/30/2018			
C 174139	Name (type or print): JEREMY GOODING		Title: CPA			
Processed 05/30/2018	* Electronically provided signatures are accepted as original signatures.					