2/003

No. C 75431 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	Reinstatement Annual Report Form ADMIN DISSOLVED 06/08/2010 1. Meiling Address: Correct in this box if needed. CONTRACTING UNLIMITED, INC. PHILIP L. ALLEN 3550 SOUTH TERRI DRIVE MERIDIAN ID 83642		2. Registered Agent and Office (NOT A P.O. BOX) PHILIP L. ALLEN 3550 SOUTH TERRI DRIVE MERIDIAN ID 83642 3. Naw Registered Agent Signature.		
REINSTATEMENT PER DUE: \$30.00 4. Corporations: Enter Nam	es and Business Addresses of President, 1	Secretary, Directors	and(optional) Tre	asurër.	
Office Held Nam		6-4-4	~~~	Jako Muntry PM	tal Code
Pres. 7	Thilip Milen	3530300	emi m	8	3642
Sec. L	Philip Allen Laurie Allen	3550 &	Terri 1	eridian, Id. 8 Meridian, Io	火 42
		·		14.	
5. Organized Under the La	we of: 6. Signature:	rie (Illen	Date: 6/	14/10
IDAHO C 75431	Name (type or print): Lac	urie Al	lea	Title: S	ec.
Issued 06/14/2010 by J.1					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct 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.

Black 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 Meli Box.

Block 3: Only a <u>new registered agent must sign</u> in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. Note: Do not put "same as lest year" or "same as above". These will not be accepted.

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.