


No. C 111360	Reinstatement Annual Report Form ADMIN DISSOLVED 10/04/2012		2. Registered Agent and Office (NOT A P.O. BOX) CLEO MILLER 1509 W GREENHURST NAMPA ID 83686																					
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. MILLER & ROSTI, INC. CLEO MILLER 1509 W GREENHURST NAMPA ID 83686																							
REINSTATEMENT FEE DUE: \$30.00			3. <u>New</u> Registered Agent Signature.																					
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <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>Pres</td> <td>Cleo Miller</td> <td>1509 W Greenhurst</td> <td>Nampa</td> <td>ID</td> <td>Canyon</td> <td>83686</td> </tr> <tr> <td>Sec/Treas</td> <td>Barbara Miller</td> <td>1509 W Greenhurst</td> <td>Nampa</td> <td>ID</td> <td>Canyon</td> <td>83686</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Pres	Cleo Miller	1509 W Greenhurst	Nampa	ID	Canyon	83686	Sec/Treas	Barbara Miller	1509 W Greenhurst	Nampa	ID	Canyon	83686
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Sec/Treas	Barbara Miller	1509 W Greenhurst	Nampa	ID	Canyon	83686																		
5. Organized Under the Laws of: IDAHO C 111360	6. Signature: <u></u> Date: <u>10/26/2012</u> Name (type or print): <u>CLEO R MILLER</u> Title: <u>Pres</u>																							

Issued 10/26/2012 by KAH

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