


No. W 50611 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than May 31, 2014 Annual Report Form 1. Mailing Address: Correct in this box if needed. M A G CONSTRUCTION LLC 221 S CEDAR POINTE AVE <i>912 W. Heather Woods Dr.</i> NAMPA ID 83686	2. Registered Agent and Office (NOT A P.O. BOX) MARIO A GONGORA 221 S CEDAR POINTE AVE NAMPA ID 83686 3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																					
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;">Manager or Member</th> <th style="text-align: left; width: 25%;">Name</th> <th style="text-align: left; width: 30%;">Street or PO Address</th> <th style="text-align: left; width: 10%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 10%;">Country</th> <th style="text-align: left; width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td> Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> </td> <td>Mario A. Gongora</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td> Manager <input type="checkbox"/> Member <input type="checkbox"/> </td> <td></td> <td>912 W. Heather Woods Dr.</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td> Manager <input type="checkbox"/> Member <input type="checkbox"/> </td> <td></td> <td>Nampa ID 83686</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td> Manager <input type="checkbox"/> Member <input type="checkbox"/> </td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Mario A. Gongora						Manager <input type="checkbox"/> Member <input type="checkbox"/>		912 W. Heather Woods Dr.					Manager <input type="checkbox"/> Member <input type="checkbox"/>		Nampa ID 83686					Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold;">IDAHO W 50611</div>	6. Signature:  <hr/> Name (type or print): <u>Mario A. Gongora</u> <div style="float: right; text-align: right;"> Date: <u>3-31-14</u> Title: <u>Owner</u> </div>																																				
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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM