

No. <b>C 183097</b>		<b>Due no later than May 31, 2014</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  PARADOX, INC. MICHAEL STORMS 999 SOUTH LEE AVENUE IDAHO FALLS ID 83404		BRANDON STORMS 999 SOUTH LEE IDAHO FALLS ID 83404			
						3. <u>New</u> Registered Agent Signature:*	
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	MICHAEL STORMS	999 SOUTH LEE AVENUE	IDAHO FALLS	ID	USA	83404	
5. Organized Under the Laws of:  <b>ID</b> <b>C 183097</b>		6. Annual Report must be signed.*  Signature: Michael Name (type or print): Michael  Date: 04/14/2014 Title: Storms					
Processed 04/14/2014      * Electronically provided signatures are accepted as original signatures.							