Mi)

Office Use Only



Annual Review Board Statement of Inforamtion Officers List



Control Number:

802408

Corporation Number:

Remit Annual Payment: \$195.00

Due Date: November 30, 2008 (Remit Immediately)

Avoid Penalties, Fines and Suspension

Remit Immediately!

Every **domestic stock and agricultural cooperative corporation** shall file a **Statement of Information** with the California Secretary of State, within 90 days after filing of its original Articles of Incorporation, and annually thereafter during the applicable filing period. A corporation is required to file this statement even though it may not be actively engaged in business at the time this statement is due.

Statutory filing provisions are found in California Corporations Code section 1502 or Food and Agricultural Code section 54040, unless otherwise indicated. Failure to file this Statement of Information by the due date will result in the assessment of a \$250.00 penalty. (Corporations Code section 2204; Revenue and Taxation Code section 19141.)

Entity Information	Agent Information (No P.O. Boxes Allowed)
Business Address:	Agent Full Name:
City, State & Zip:	Address:
Contact Phone #:	City, State & Zip:
Officers Information	Directors Information
President Name:	Director Name:
Address:	Address:
City, State & Zip:	City, State & Zip:
Secretary Name:	Director Name:
Address:	Address:
City, State & Zip:	City, State & Zip:
Treasurer Name:	Director Name:
Address:	Address
City, State & Zip	City, State & Zip:
	tity to be assessed Penalties, Fines and SUSPENSION. Should the Entity become

Failure to comply with the Necessary filing will cause the Entity to be assessed Penalties, Fines and **SUSPENSION**. Should the Entity become **SUSPENDED**, you will **not** have the right to conduct business, your Entity name could be taken, losing your Corporate Existence will have many negative ramifications.

Make Check Payable to: Annual Review Board

Certified and Endorsed Statement will be returned to the office of the Corporation within 10 Business days of filing. This in not an invoice, Annual Review Board is not a Government Agency. In submitting this form you give authorization to ARB to file your Statement of Officers. I, (we) certify that the above is true and correct.

1		•	
Print Name		Signature	· · ·
333 S. Grand Avenue 25th Floor	Los Angeles, CA 90071		Phone: 213 943 1320

Statement of Officers Domestic Stock Statement

Every domestic and Agricultural Cooperative Corporation shall file a Statement of Information with the California Secretary of State, within 90 days after filing of its Original Articles of Incorporation and annually thereafter during the applicable filing period. The applicable filing period for a Corporation is the Calendar month during which its original Articles of Incorporation were filed and then immediately preceding five calendar moths. A Corporation is required to file their Statement of Information even though it may not be actively engaged in business at the time their Statement is due. Changes to the Statement of Information which was previously filed can be made by filing a new Statement of Information and completed in its entirety.

Statutory filing provisions are found in **California Corporations Code Section 1502** or Food and Agricultural **Code Section 54040.** Should the Corporation fail to file their Statement of Information by the due date, they will be assessed a penalty in the amount of \$250.00 (California Corporations Code Sections 2204; Revenue and Taxation Code Section 19141).

Further failure to file will cause the Corporation to become **SUSPENDED**, while the Corporation is under the status of **SUSPENSION**, it loses many benefits;

Loses it's right to conduct business
Loses the right to Retain the Entity Name, while Suspended anyone can file
Articles of Incorporation and retain your Corporation name, you will then be forced
to change your entity name
No right to answer law suit

Above are just a few of the negative issues that will arise for non-filing of your Statement of Officers.

How to avoid penalties and Suspension; complete this form and return to the Annual Review Board, this will cause the Corporations Statement of Information to be filed with the office of the California Secretary of State pursuant to the California Corporations Code Section 1502. Upon receipt of *completed form, Annual Review Board will cause the Statement of Officers to be filed; an Endorsed Certified copy of said filing will be returned to the office of the Corporation within 10 business days of filing.

Submit Completed form by Due Date; Submit form to Annual Review Board by **DUE DATE** to ensure **NO PENALTIES** will be assessed. Be sure form is *completed in its entirety, failure to submit a *completed form will cause delay in filing.

Corporation Information: The Corporation is formed under the Laws of the State of California and is required to submit the Statement of Officers, include the principal Executive office for the Corporation with a physical address, please **DO NOT USE P.O. BOX,** or abbreviate the name of the City.

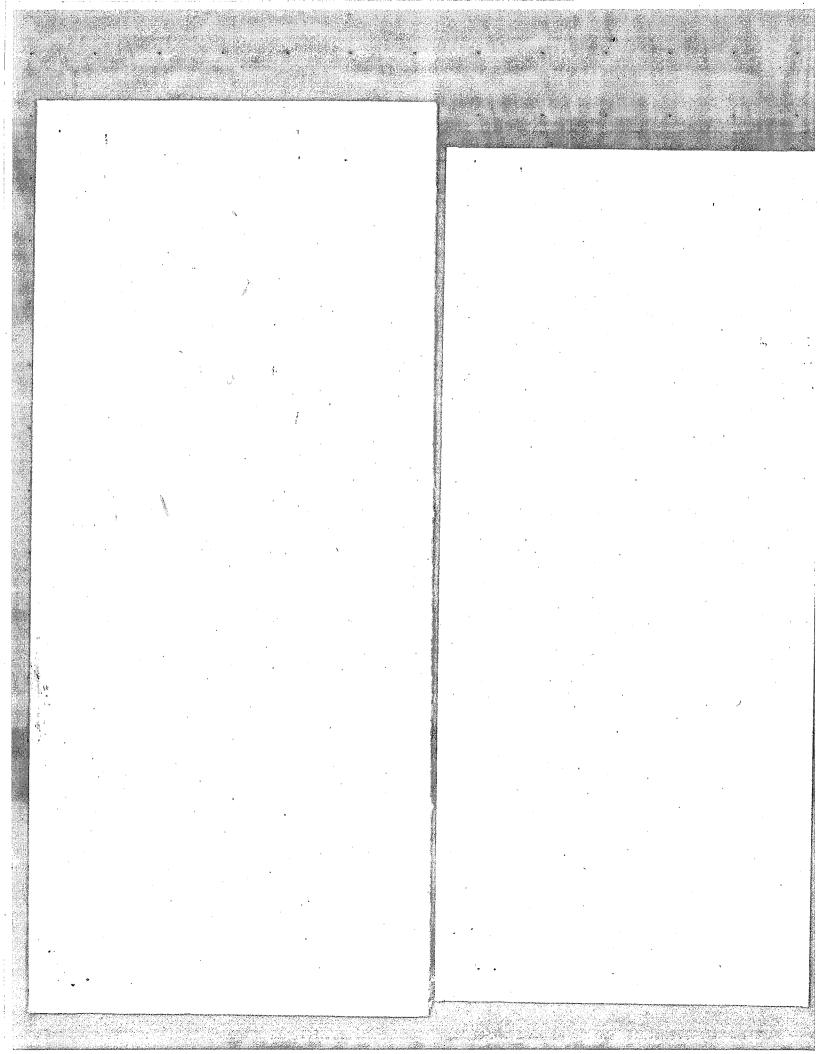
Agent Information: Enter the name of the Agent for Service of Process in California, an Agent is an Individual (Director, Officer or any other person whether or not affiliated with the Corporation) who resides in California and is designated to accept service of process if the Corporation is sued. The Agent must agree to accept service of process on behalf of the Corporation.

Officer / Director Information: Enter the name and complete Business or Residential address of all the Officers and Directors, the Corporation must have officers (Corporations Code Section 312(a) and at least one Directors (Corporations Code Section 212(a) Attach additional pages, if necessary. Please be sure to complete address and do not abbreviate the City.

Please complete all the requested information, by responding by the Due Date you ensure processing time. Annual Review Board is not a Government Agency. Annual Review Board can not give legal advice, Remit form immediately to avoid fines, penalties and Suspension.

^{*}Annual Review Board will not be responsible for any penalties for late filing for an incomplete form.

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Annual Review Board Statement of Information Officers List

WALNUT CREEK, CA 94596-5570

Control Number: 302217
Corporation Number:

Remit Payment: \$195.00 Due Date: June 15, 2009

(Remit Immediately)

Avoid Penalties, Fines and Suspension

Remit Immediately!

Every domestic stock and agricultural cooperative corporation shall file a Statement of Information with the California Secretary of State, within 90 days after filing of its original Articles of Incorporation, and annually thereafter during the applicable filing period. A corporation is required to file this statement even though it may not be actively engaged in business at the time this statement is due.

Statutory filing provisions are found in California Corporations Code section 1502 or Food and Agricultural Code section 54040, unless otherwise indicated. Failure to file this Statement of Information by the due date will result in the assessment of a \$250.00 penalty. (Corporations Code section 2204; Revenue and Taxation Code section 19141.)

Fill out Form Completely, to Avoid Delays!

Entity Information (Must be CA Address)	Agent Information (P.O. Box not Allowed, Must be CA Address)		
Business Address:	Agent Full Name:		
City, State & Zip:	Address:		
Phone: Fax:	City & Zip in CA only:		
Officers Information (Must name all 3 Officers)	Directors Information (Must name at least one Director)		
President Name:	Director Name:		
Address:	Address:		
City, State & Zip:	City, State & Zip:		
Secretary Name:	Director Name:		
Address:	Address:		
City, State & Zip:	City, State & Zip:		
Treasurer Name:	Director Name:		
Address:	Address		
City, State & Zip	City, State & Zip:		

Business Description:

Failure to comply with the Necessary filing will cause the Entity to be assessed Penalties, Fines and SUSPENSION. Should the Entity become SUSPENDED, you will not have the right to conduct business, your Entity name could be taken, losing your Corporate Existence will have many negative ramifications.

Make Check Payable to: Annual Review Board

CA B&P CODE SEC 17533.6. THIS PRODUCT OR SERVICE HAS NOT BEEN APPROVED OR ENDORSED BY ANY GOVERNMENT AGENCY, AND THIS OFFER IS NOT BEING MADE BY AN AGENCY OF THE GOVERNMENT. The referenced government agency may be contacted at California Secretary of State, P.O. Box 944230 Sacramento, CA 94244. In submitting this form you give Authorization to ARB to sign and file you statement of officers on your behalf. I, (we) certify that the above is true and correct.

Print Name Signature

333 S. Grand Avenue, 25th Floor

Los Angeles, CA 90071

Phone: 213 986 4414

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Loses the right to Retain the Entity Name, while Suspended anyone can file
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Submit Completed form by Due Date; Submit form to Annual Review Board by DUE DATE to ensure NO PENALTIES will be assessed. Be sure form is *completed in its entirety, failure to submit a *completed form will cause delay in filing. Returned checks will be charged a \$25.00 return check fee.

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Agent Information: Enter the name of the Agent for Service of Process in California, an Agent is an Individual (Director, Officer or any other person whether or not affiliated with the Corporation) who resides in California and is designated to accept service of process if the Corporation is sued. The Agent must agree to accept service of process on behalf of the Corporation.

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Please Check box if this is a new address [__]

ANNUAL REVIEW BOARD CORPORATION DIVISION 333 S GRAND AVE STE 2500 LOS ANGELES CA 90071-1529





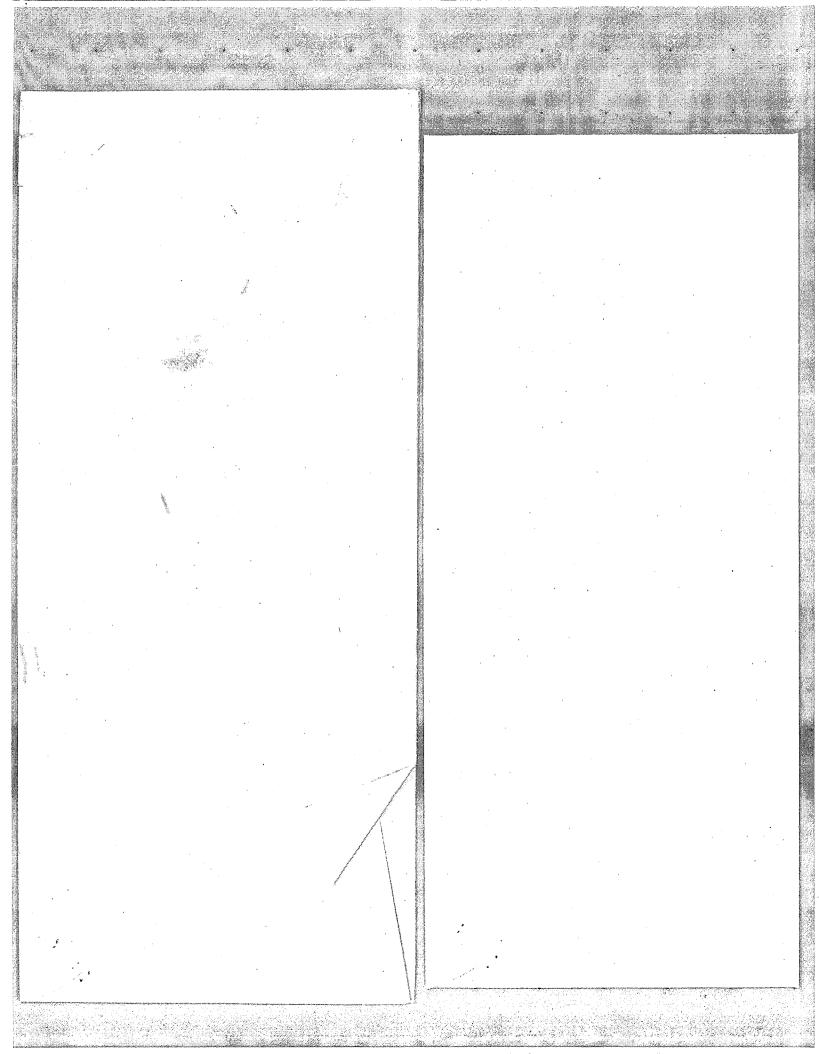
Annual Review Board 333 S. Grand Ave. 25th FL Los Angeles, CA 90071

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Office Use Only



Annual Review Board Statement of Information Limited Liability Company



Control Number:

714912

CA LLC Number:

Remit Payment: \$228.00 Due Date: April 15, 2009

(Remit Immediately)

Avoid Penalties, Fines and Suspension

Remit Immediately!

Every Domestic and Registered Foreign Limited Liability Company shall file or cause to be filed a Statement of Information with the California Secretary of State, within 90 days after filing of its original Articles of Organization or Application of Registration, and biennially thereafter during the applicable filing period. The appropriate filing period for a Limited Liability Company is the Calendar month during which its original Articles of Organization or Application of Registration were filed and then immediately preceding five Calendar months. A Limited Liability Company is required to file their Statement of Information even though it may not be actively engaged in business at the time their Statement is due. Changes to information contained in a previously filed Statement can be made by filing a new Statement of Information in its entirety.

Statutory filing provisions are found in California Corporations Code Section 17060, unless otherwise indicated. Failure to file the Statement of Information by the **DUE DATE** will result in the assessment of a \$250.00 penalty which will be assessed by the California Franchise Tax Board, Corporations Code Sec 17651(b) and 17653; Revenue and Taxation Code Section 19141.

Fill out Form Completely, to Avoid Delays!

LLC Information (Must have CA Address) **Agent Information** (P.O. Box not Allowed, Must be CA Address) Business Address: Agent Full Name: City, State & Zip: Address: Phone: City & Zip in CA only: Fax: Name and Address of Managers / Members (must name at least one Member / Manager) Member / Manager Name City Zip Address State Member / Manager Name Address Zip City State Member / Manager Name Address City State Zip Zip Member / Manager Name Address City . State **Business Description:**

Failure to comply with the Necessary filing will cause the Entity to be assessed Penalties, Fines and **SUSPENSION**. Should the Entity become **SUSPENDED**, you will **not** have the right to conduct business, your Entity name could be taken, losing your Corporate Existence will have many negative ramifications.

Make Check Payable to: Annual Review Board

CA B&P CODE SEC 17533.6. This product or service has not been approved or endorsed by any Government Agency, and this offer is not being made by an agency of the Government. In submitting this form you give authorization to ARB to sign and file your Statement of Officers on your behalf.

I, (we) certify that the above is true and correct.

Print Member / Manager Name Member / Manager Signature

L4D

333 S. Grand Avenue, 25th Floor

Los Angeles, CA 90071

Phone: 213 986 4414

Statement of Information Limited Liability Company

Every domestic and registered foreign Limited Liability Company shall file a Statement of Information with the California Secretary of State, within 90 days after filing of its Original Articles of Organization or Application of Registration and biennially thereafter during the applicable filing period. The applicable filing period for the Limited Liability Company is the Calendar month during which its original Articles of Organization or Application of Registration were filed and then immediately preceding five calendar months. A Limited Liability Company is required to file their Statement of Information even though it may not be actively engaged in business at the time their Statement is due. Changes to the Statement of Information which was previously filed can be made by filing a new Statement of Information and completed in its entirety.

Statutory filing provisions are found in **California Corporations Code Section 17060.** Should the Limited Liability Company fail to file their Statement of Information by the due date, they will be assessed a penalty in the amount of \$250.00 (California Corporations Code Sections 17651 (b) and 17653; Revenue & Taxation Code Section 19141).

Further failure to file will cause the Limited Liability Company to be **SUSPENDED**, while the Limited Liability Company is under the status of **SUSPENSION**, it loses many benefits;

Loses its right to conduct business
Loses the right to Retain the Entity Name, while Suspended anyone can file
Articles of Organization and retain your LLC name, you will then have to amend
the Limited Liability Company Name
Leaves LLC Properties Vulnerable
No right to answer law suit

Above are just a few of the negative issues that will arise for non-filing of your Statement of Information.

How to avoid penalties and Suspension; complete this form and return to the Annual Review Board, this will cause the Limited Liability Company's Statement of Information to be filed with the office of the California Secretary of State pursuant to the California Corporations Code Section 17060. Upon receipt of *completed form, Annual Review Board will cause the Statement of Information to be filed, an Endorsed Certified copy of said filing will be returned to the office of the Limited Liability Company within 21 business days of filing.

Submit Completed form by Due Date; Submit form to Annual Review Board by DUE DATE to ensure NO PENALTIES will be assessed. Be sure form is *completed in its entirety, failure to submit a *completed form will cause delay in filing. Returned checks will be charged a \$25.00 return check fee.

LLC Information: The Limited Liability Company is formed under the Laws of the State of California and is required to have a physical address pursuant to the **California Corporations Code Section 17057(a)**, complete LLC information with a physical address, please **DO NOT USE P.O. BOX**, or abbreviate the name of the City.

Agent Information: Enter the name of the Agent for Service of Process in California, an Agent is an Individual (manager, member or any other person, whether or not affiliated with the Limited Liability Company) who resides in California designated to accept service of process if the Limited Liability Company is sued. The Agent must agree to accept service of process on behalf of the Limited Liability Company.

Managers / Members Information: Enter the name and complete Business or Residential address of any Manager or Managers, appointed or elected in accordance with the Articles of Organization or Operating Agreement, or if no Manager has been so elected or appointed, the name and business or residential address of each Member. Attach additional pages, if necessary. Please be sure to complete address and not abbreviate City.

Form must be completed in its entirety

^{*}Annual Review Board will not be responsible for any penalties for late filing for an incomplete form.

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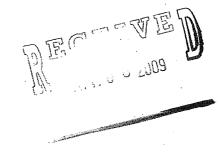
ANNUAL REVIEW BOARD LLC DIVISION 333 S GRAND AVE STE 2500 LOS ANGELES CA 90071-1529

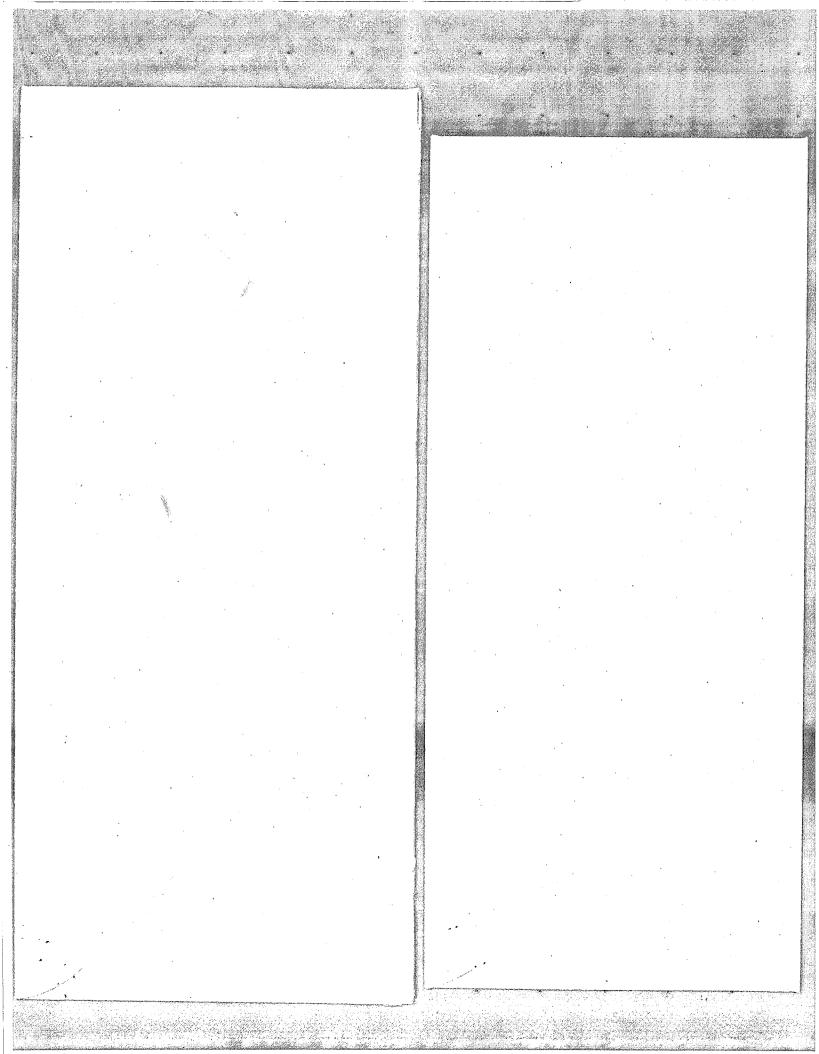
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Annual Review Board 333 S. Grand Ave. 25th FL Los Angeles, CA 90071

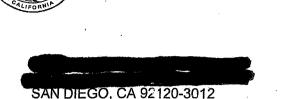
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Business Filings Division Statement of Information Limited Liability Company



Control Number: 3B-24123

CA LLC Number:

Remit Payment: \$239.00 Due Date: July 15, 2009

(Remit Immediately)

Avoid Penalties, Fines and Suspension

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Remit Immediately!

Every Domestic and Registered Foreign Limited Liability Company shall file or cause to be filed a Statement of Information with the California Secretary of State, within 90 days after filing of its original Articles of Organization or Application of Registration, and biennially thereafter during the applicable filing period. The appropriate filing period for a Limited Liability Company is the Calendar month during which its original Articles of Organization or Application of Registration were filed and then immediately preceding five Calendar months. A Limited Liability Company is required to file their Statement of Information even though it may not be actively engaged in business at the time their Statement is due. Changes to information contained in a previously filed Statement can be made by filing a new Statement of Information in its entirety.

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Please Print Clearly!

Fill out Form Completely; to Avoid Delays!

LLC Information (Must have CA Address)		Agent Inform	Agent Information (P.O. Box not Allowed, Must be CA Address)			
Business Address:		Agent Full Name:			•	
City, State & Zip:		Address:				
Phone: F	Fax:	City & Zip in CA on	ly:			
Name and Address of Man	agers / Members (n	nust name at least one Mei	mber / Manager)			
Member / Manager Name	Address	City		State	Zip	
Member / Manager Name	Address	City		State	Zip	
Member / Manager Name	Address	City		State	Zip	
Member / Manager Name	Address	City	1	State	Zip	
Business Description:						
Failure to comply with the Necess Entity become SUSPENDED , you Corporate Existence will have mare CA B&P CODE SEC 17533.6. THE GOVERNMENT AGENCY, AND Treferenced government agency man submitting this form you give Au I, (we) certify that the above is true	will not have the right to ny negative ramifications Make Check Payabl IS PRODUCT OR SERV THIS OFFER IS NOT BE ay be contacted at Califo uthorization to BFD to sig	o conduct business, you be to: Business Filing VICE HAS NOT BEEN BING MADE BY AN AG Dornia Secretary of State	ur Entity name gs Division APPROVED OF GENCY OF THE e, P.O. Box 944	could be taker R ENDORSED GOVERNME 228 Sacramer	n, losing your O BY ANY NT. The	
Print Member /	Manager Name		Member / Man	ager Signature	Э <u>:</u>	
980 Ninth Street, 16th Floor	S	Sacramento, CA 95814		91	6 903 5355	

Statement of Information Limited Liability Company

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Loses its right to conduct business
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Leaves LLC Properties Vulnerable
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Upon receipt of your payment: Business Filings Division will hand deliver the Statement of Information to the Office of the California Secretary of State in a timely manner along with the State Fees. Upon completion of filing you will receive a Certified, Stamped Endorsed Statement of Information. Please be sure that you retain in your Corporate Records Book for Safe Keeping and easy access.

LLC Information: The Limited Liability Company is formed under the Laws of the State of California and is required to have a physical address pursuant to the **California Corporations Code Section 17057(a)**, complete LLC information with a physical address, please **DO NOT USE P.O. BOX**, or abbreviate the name of the City.

Agent Information: Enter the name of the Agent for Service of Process in California, an Agent is an Individual (manager, member or any other person, whether or not affiliated with the Limited Liability Company) who resides in California designated to accept service of process if the Limited Liability Company is sued. The Agent must agree to accept service of process on behalf of the Limited Liability Company.

Managers / Members Information: Enter the name and complete Business or Residential address of any Manager or Managers, appointed or elected in accordance with the Articles of Organization or Operating Agreement, or if no Manager has been so elected or appointed, the name and business or residential address of each Member. Attach additional pages, if necessary. Please be sure to complete address and not abbreviate City.

Form must be completed in its entirety

^{*}Business Filings Division will not be responsible for any penalties for late filing for an incomplete form.

Postage Required Post Office will not deliver without proper postage

Business Filings Division LLC Unit 980 Ninth St. 16th FL Sacramento, CA 95814-2736

BUSINESS FILINGS DIVISION 980 NINTH ST. 16th FL SACRAMENTO, CA 95814

BUSINESS MAIL - IMPORTANT NOTICE ENCLOSED THIS IS NOT A GOVERNMENT DOCUMENT



PLEASE ENCLOSE FORM ENCLOSE CHECK OR MONEY ORDER (payable to: BFD)





Business Filings Division Statement of Information Officers List



Control Number: 26019

Corporation Number:

Remit Payment: \$235.00 Due Date: August 31, 2009

(Remit Immediately)

Avoid Penalties, Fines and Suspension

Remit Immediately!

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Entity Information	Agent Information (P.O. Box not Allowed, Must be CA Address)
Business Address:	Agent Full Name:
City, State & Zip:	Address:
Phone: Email: Fax:	City & Zip in CA only:
Officers Information (Must name all 3 Officers)	Directors Information (Must name at least one Director)
President Name:	Director Name:
Address:	Address:
City, State & Zip:	City, State & Zip:
Secretary Name:	Director Name:
Address:	Address:
City, State & Zip:	City, State & Zip:
Treasurer Name:	Director Name:
Address:	Address
City, State & Zip	City, State & Zip:

Business Description:

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GOVERNMENT AGENCY, AND THIS OFFER IS NOT BEING MADE BY AN AGENCY OF THE GOVERNMENT. THIS IS NOT A BILL. THIS IS A SOLICITATION. YOU ARE UNDER NO OBLIGATION TO PAY THE AMOUNT STATED ABOVE UNLESS YOU ACCEPT THIS OFFER. The referenced government agency may be contacted at California Secretary of State, P.O. Box 944230 Sacramento, CA 94244. In submitting this form you give Authorization to BFD to sign and file you statement of officers on your behalf. I, (we) certify that the above is true and correct.

Print Member / Manager Name

Member / Manager Signature

C4A

980 Ninth Street, 16th Floor

Sacramento, CA 95814

916 903 5355

Statement of Officers Domestic Stock Statement

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Submit Completed form by Due Date; Submit form to Business Filings Division by **DUE DATE** to ensure **NO PENALTIES** will be assessed. Be sure form is *completed in its entirety, failure to submit a *completed form will cause delay in filing. **Returned checks will be charged a \$25.00 return check fee.**

Corporation Information: The Corporation is formed under the Laws of the State of California and is required to submit the Statement of Officers, include the principal Executive office for the Corporation with a physical address, please **DO NOT USE P.O. BOX**, or abbreviate the name of the City.

Agent Information: Enter the name of the Agent for Service of Process in California, an Agent is an Individual (Director, Officer or any other person whether or not affiliated with the Corporation) who resides in California and is designated to accept service of process if the Corporation is sued. The Agent must agree to accept service of process on behalf of the Corporation.

Officer / Director Information: Enter the name and complete Business or Residential address of all the Officers and Directors, the Corporation must have officers (Corporations Code Section 312(a) and at least one Directors (Corporations Code Section 212(a) Attach additional pages, if necessary. Please be sure to complete address and do not abbreviate the City.

Please complete all the requested information, by responding by the Due Date you ensure processing time. Business Filings Division is not a Government Agency. Business Filings Division can not give legal advice, Remit form immediately to avoid fines, penalties and Suspension.

Form must be completed in its entirety

^{*}Business Filings Division will not be responsible for any penalties for late filing for an incomplete form.

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Business Filings Division
Corporation Unit
980 Ninth St. 16th FL
Sacramento, CA 95814-2736

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BUSINESS FILINGS DIVISION 980 NINTH ST. 16th FL SACRAMENTO, CA 95814

BUSINESS MAIL - IMPORTANT NOTICE ENCLOSED THIS IS NOT A GOVERNMENT DOCUMENT



PLEASE ENCLOSE FORM ENCLOSE CHECK OR MONEY ORDER (payable to: BFD)