

No. C 102321	Due no later than Jun 30, 2001 Annual Report Form		2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable PROFESSIONAL LIQUIDATION, INC. THOMAS E BURGE 6195 PLANTATION LANE 1406 N. LOPEZ Way BOISE, ID 83703 Eagle Id. 83616		THOMAS E BURGE 6195 PLANTATION LANE 1406 N LOPEZ Way BOISE, ID 83703 Eagle Id. 83616 3. New Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>PRES.</td> <td>Myra Burge</td> <td>1406 N. LOPEZ Wy.</td> <td>Eagle Id</td> <td></td> <td>83616</td> </tr> <tr> <td>Sec.</td> <td>Thomas Burge</td> <td>" "</td> <td>" "</td> <td>" "</td> <td>" "</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	PRES.	Myra Burge	1406 N. LOPEZ Wy.	Eagle Id		83616	Sec.	Thomas Burge	" "	" "	" "	" "
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PRES.	Myra Burge	1406 N. LOPEZ Wy.	Eagle Id		83616																
Sec.	Thomas Burge	" "	" "	" "	" "																
5. Organized Under the Laws of: IDAHO C 102321		6. Signature <u>Thomas E. Burge</u> Date <u>4/13/01</u> Name (Typed or Printed) <u>Thomas E. Burge</u> Title: <u>sec.</u> XXXX																			