	Due no later than November 30, 2004	2 Pagistand 4
Return to:	Annual Report Form	2. Registered Agent and Office NO PO BOX
SECRETARY OF STATE	 Mailing Address - Correct in this box, if applicable 	JOAN R MORSE
700 WEST JEFFERSON PO BOX 83720	HALLEL SOLUTIONS INC	7040 S SAGEVIEW CIRCLE
BOISE, ID 83720-0080	7040 S SAGEVIEW CIRCLE IDAHO FALL, ID 83406 8259	IDAHO FALL, ID 83406 8259
NO FILING FEE IF		3. New Registered Agent Signature
RECEIVED BY DUE DATE		- Completely
4. Corporations: Enter Nar	mes and Business Addresses at B	
Office held Name	nes and Business Addresses of President, Secreta	y and Directors.
Office Jany	Street or P.O. Address City	State Zip
Tiles.	NOICE 1090 SO, SAGEVIEW CIR	eie Idanofalis, 70 83406
TREASONER LESTIE	Street or P.O. Address City MOIZSE 7040 So. SAKEVIEW CIRE P. MORSE "	'
TREMSONEN LESLIE	P. MORSE "	eif Idahofalls, 70 83406 "
TREMSONEN LESTIE	P. MORSE "	'
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TREMSONEN LESTIE	P. MORSE "	'
MEMSUREN LES/IE	P. Morse	'
5. Organized Under the Laws of:	P. Morse	
5. Organized Under the Laws of:	P. Morse	'
5. Organized Under the Laws of:	P. Morse	Date 09-11-04
5. Organized Under the Laws of:	6. Signature Jan Moure	