

|  |                  |  |      |  |       |  |
|--|------------------|--|------|--|-------|--|
| O. C 96345   |                  | Due no later than Sep 30, 2000<br>Annual Report Form   |      | 2. Registered Agent and Office NO PO BO                                |       |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                  | 1. Mailing Address - Correct in this box, if applicable<br><br>T & T ENTERPRISES, INC.<br>THOMAS P CAPONE<br>819 E ST. MARIES AVE<br><br>COEUR D'ALENE, ID 83814 |      | THOMAS P. CAPONE<br>819 E ST MARIES AVE<br><br>COEUR D'ALENE, ID 83814 |       |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |                  |  |      | 3. New Registered Agent Signature                                      |       |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.     |                  |  |      |  |       |  |
| Office held  | Name             | Street or P.O. Address   | City | State  | Zip   |  |
| Pres.  | Thomas P. Capone | 819 E. St. Maries Ave  | COA  | Id   | 83814 |  |
| V-Pres   | Teresa J. Capone | "  | "    | "  | "     |  |
| Sec./Treas   | Teresa J. Capone | "  | "    | "  | "     |  |
| 5. Organized Under the Laws of:<br><br>IDAHO<br>C 96345  |                  | 6. Signature <u>T.J. Capone, VP</u><br>Name <small>(Typed or Printed)</small> <u>T.J. Capone</u> Date <u>9-7-00</u><br>Title <small>(Type)</small> <u>V-Pres</u> |      |  |       |  |

Issued 07/10/2000

Do Not Tape or Staple

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