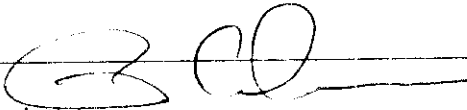


No. C 153830	Due no later than March 31, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX PHILLIP COLEMAN 1690 SPRING ROCK LN HAYDEN, ID 83835																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable COLEMAN GROUP, INC. PHILLIP COLEMAN 1690 SPRING ROCK LN HAYDEN, ID 83835		3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Philip Coleman</td> <td>1690 Spring Rock Ln</td> <td>Hayden, ID.</td> <td></td> <td>83835</td> </tr> <tr> <td>Vice-President</td> <td>Miriam Coleman</td> <td>1690 Spring Rock Ln</td> <td>Hayden, ID</td> <td></td> <td>83835</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	President	Philip Coleman	1690 Spring Rock Ln	Hayden, ID.		83835	Vice-President	Miriam Coleman	1690 Spring Rock Ln	Hayden, ID		83835
Office held	Name	Street or P.O. Address	City	State	Zip																
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5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO C 153830 </div>	6.  Signature _____ Date <u>3-4-05</u> Name (Typed or Printed) <u>Philip Coleman</u> Title <u>President</u>																				