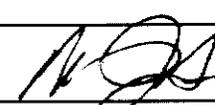


No. <b>C119886</b>	<b>Annual Report Form 1999</b> <i>Due No Later Than November 30,</i>	2. Registered Agent and Office <b>NOT A P.O. BOX</b> <b>MURRAY JIM SORENSEN</b> <b>285 NW MAIN</b>  <b>BLACKFOOT ID 83221</b>																				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>  <b>** FINAL NOTICE **</b>	1. Mailing Address - Please Correct, If Not Correct <b>CUSTOM COVERINGS &amp; CONCRETE</b>  <b>PO BOX 1047</b>  <b>BLACKFOOT ID 83221</b>	3. Organized Under the Laws of:  <b>ID C119886</b>																				
4. Corporations: Enter Names and Business Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input checked="" type="checkbox"/> <b>Members</b> (check one)																						
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">Office held</th> <th style="width:25%;">Name</th> <th style="width:30%;">Street or P.O. Address</th> <th style="width:10%;">City</th> <th style="width:10%;">State</th> <th style="width:10%;">Zip</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><i>Pres</i></td> <td style="text-align: center;"><i>Ben Sorenson</i></td> <td style="text-align: center;"><i>63 W 215 N.</i></td> <td style="text-align: center;"><i>Blackfoot</i></td> <td style="text-align: center;"><i>ID</i></td> <td style="text-align: center;"><i>83221</i></td> </tr> <tr> <td style="text-align: center;"><i>Sec/Tre.</i></td> <td style="text-align: center;"><i>Ben Sorenson</i></td> <td style="text-align: center;"><i>63 W 215 N</i></td> <td style="text-align: center;"><i>Blackfoot</i></td> <td style="text-align: center;"><i>ID</i></td> <td style="text-align: center;"><i>83221</i></td> </tr> </tbody> </table>	Office held	Name	Street or P.O. Address	City	State	Zip	<i>Pres</i>	<i>Ben Sorenson</i>	<i>63 W 215 N.</i>	<i>Blackfoot</i>	<i>ID</i>	<i>83221</i>	<i>Sec/Tre.</i>	<i>Ben Sorenson</i>	<i>63 W 215 N</i>	<i>Blackfoot</i>	<i>ID</i>	<i>83221</i>				
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5. <u>New</u> Registered Agent Signature	6. Signature  Date <u>10-11-99</u> Name (Typed or Printed) <u>Murray Jim Sorenson</u> Title <u>Reg Agent/attorney</u>																					

ISSUED: 10-01-1999

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