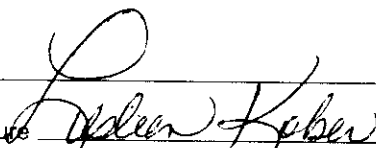
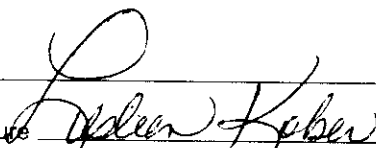
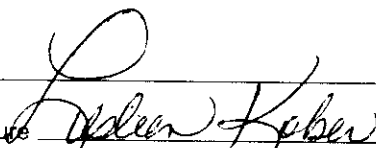


No. C 100051	Due no later than November 30, 2003 Annual Report Form		2. Registered Agent and Office NO PO BOX LESLEEN KOBER 730 S PINE FEATHERVILLE RD MOUNTAIN HOME, ID 83647
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box if applicable D.C.L., INC. LESLEEN KOBER 730 S PINE FEATHERVILLE RD MOUNTAIN HOME, ID 83647		3. <u>New</u> 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
President	Lesleen M Kober	488 N Alpine CR.	Pine	Id	83647
Treasurer	Lesleen M Kober	488 N. Alpine CR.	Pine	Id	83647

5. Organized Under the Laws of: IDAHO C 100051	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"> Signature  </td> <td style="width: 50%;"> Date <u>Sept 10, 03</u> </td> </tr> <tr> <td> Name (Typed or Printed) <u>Lesleen Kober</u> </td> <td> Title <u>President</u> </td> </tr> </table>	Signature 	Date <u>Sept 10, 03</u>	Name (Typed or Printed) <u>Lesleen Kober</u>	Title <u>President</u>
Signature 	Date <u>Sept 10, 03</u>				
Name (Typed or Printed) <u>Lesleen Kober</u>	Title <u>President</u>				