No. C 64073		Due no later than Jun 30, 2008 Annual Report Form 1. Mailing Address: Correct in this box if needed. GOFFINET & CLACK, CHARTERED JOHN GOFFINET P.O BOX 629 OROFINO ID 83544		2.	2. Registered Agent and Address (NO PO BOX) JOHN GOFFINET 125 FIRST STREET OROFINO ID 83544 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE				!				
4. Corporations: Enter Na	mes and Busin	ess Addresses of Presid	lent, Secretary, and Directors. Treas	surer (opt	ional).			
Office Held	Name		Street or PO Address	C	City	State	Country	Postal Code
DIRECTOR	STEVE CLAC	K	P.O. BOX 1696	0	ROFINO	ID	USA	83544
DIRECTOR	JOHN GOFFI	NET	P.O. BOX 869	0	ROFINO	ID	USA	83544
SECRETARY	STEVE CLAC	CK	P.O. BOX 1696	0	ROFINO	ID	USA	83544
PRESIDENT	JOHN GOFFI	NET	P.O. BOX 869	0	ROFINO	ID	USA	83544
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: John Goffinet			Date: 05/16/2008			
C 64073		Name (type or print): John Goffinet			Title: President			
Processed 05/16/2008 * Electronically provided signatures are accepted as original signatures.								