

No. W 26991

Due no later than November 30, 2006
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

INCIDENT CATERING SERVICES, LLO
1429 AVE D # 166
SNOHOMISH, WA 98290CT CORPORATION SYSTEM
300 N 6TH ST
BOISE, ID 83702NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
MANAGER	RAY KEENER	1429 AVE D # 166	SNOHOMISH	WA	98290
MEMBER	JOHN KEENER	1429 AVE D # 166	SNOHOMISH	WA	98290
MEMBER	WAYNE KEENER	1429 AVE D # 166	SNOHOMISH	WA	98290

5. Organized Under the Laws of:

WASHINGTON
W 26991

6.

Signature

Name (Typed or Printed)

RAY KEENER

Date

9/19/06

Title

MANAGER

Issued 09/01/2006

Do Not Tape or Staple

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