No. C 139674	Due no later than July 31, 2004 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 **NO FILING FEE IF RECEIVED BY DUE DATE**	1. Mailing Address - Correct in this box, if applicable MAYAN INSURANCE INC. ~~550 2ND ST~~ 209 2nd Street IDAHO FALLS, ID 83401	JASON J ROLFE 209 2ND ST IDAHO FALLS, ID 83401 3. New 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	Jason Rolfe	209 2nd St	Idaho Falls	ID	83401
Vice President	Will Hopson	143 N. 3rd W	Rigby	ID	83442
Treasurer	Katheryn Rolfe	209 2nd	Idaho Falls,	ID	83401
Secretary	Katheryn Rolfe	209 2nd	Idaho Falls,	ID	83401

5. Organized Under the Laws of:	6.
IDAHO C 139674	Signature _____ Date 7-29-04 Name (Typed or Printed) Jason Rolfe Title President

Issued 05/03/2004 **Do Not Tape or Staple** 2004072852