

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

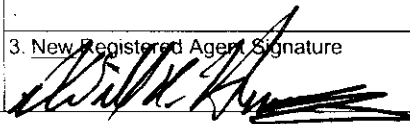
1. Mailing Address - Correct in this box, if applicable

MAYAN INSURANCE INC.
~~550 2ND ST~~ 209 2nd Street
IDAHO FALLS, ID 83401

JASON J ROLFE
209 2ND ST
IDAHO FALLS, ID 83401

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature



4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

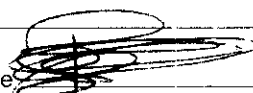
Office held	Name	Street or P.O. Address	City	State	Zip
President	Jason Rolfe	209 2nd St	Idaho Falls	ID	83401
Vice President	Will Hopson	143 N. 3rd W	Rigby	ID	83442
Treasurer	Kathryn Rolfe	209 2nd	Idaho Falls	ID	83401
Secretary	Kathryn Rolfe	209 2nd	Idaho Falls	ID	83401

5. Organized Under the Laws of:

IDAHO
C 139674

6.

Signature



Date

7-29-04

Name (Typed or Printed)

Jason Rolfe

Title

President