	Due no later than Jun 30, 2002	0.5
Return to:	Annual Report Form	Registered Agent and Office NO PO BOX
SECRETARY OF STATE	Mailing Address - Correct in this box if applicable	KARL MALONE
700 WEST JEFFERSON PO BOX 83720	MALONE & ASSOCIATE COUNTERTOP REPAI	2945 ROCK CREEK RD
BOISE, ID 83720-0080	2945 ROCK CREEK RD	HANSEN, ID 83334
NO FILING FEE IF	HANSEN, ID 83334	3. New Registered Agent Signature
RECEIVED BY DUE DATE		Silver of Agent dignature
 Limited Liability Compa 	anies: Enter Names and Addresses of Managers.	
	Street or D.O. A.L.	
PRESIDENT KARE MA	Street or P.O. Address City 11 UNG 2945 ROLK CRAIL RD HA	WSW TD F22XI
	143 NOCK CROOK KD HA	MSKN IN F3334
	,,	27 8 3339
		27 8 3339
		3339
5. Organized Under the Lawy		
5. Organized Under the Laws of:	6.	27 8 3339
5. Organized Under the Laws of: IDAHO		J 3339
	6. Signature	Date 04.06.02
IDAHO W 12246	6.	Date 04.06.02
IDAHO	6. Signature	J 3339