No. C 121804	Due no later than December 31, 2003 Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON	t Mailing Address - Correct in this box, if applicable	BURKE L RICHMAN
	BURKE L. RICHMAN, INC.	2487 KIMBERLY RD STEA 834 Falls Ave Suite 2/70
PO BOX 83720 BOISE, ID 83720-0080	834 FALLS AVE STE 2170	TWIN FALLS, ID 83301
	TWIN FALLS, ID 83301	3. New Registered Agent Signature
NO FILING FEE IF RECEIVED BY DUE DATE	TVVIIN PALES, ID 65501	
4. Compositions: Enter Nar	mes and Business Addresses of President, Secreta	ary and Directors. State <u>Zip</u>
Office held Name	D. L. 334 Falls Ave Suite 2170	Thun Falls ID 8330/
Georetary Ann R	Street or P.O. Address Richman 834 Falls Ave Suite 2170 Tichman 834 Falls Ave Suite 2170	TWIN FALLS ID 83301
		<i>A</i>
5. Organized Under the Laws of:	6. Signature Joule Jah	na Date 11/06/2003
5. Organized Under the Laws of: IDAHO C 121804	Jan Ja Jan Jan Jan Jan Jan Jan Jan Jan J	A 1 1