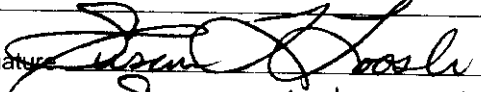


No. C 137087	Due no later than January 31, 2004 Annual Report Form		2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address (if different from this box, if applicable) LOOSLI REAL ESTATE, INC. PO BOX 408 TWIN FALLS, ID 83301		SUSAN L LOOSLI 769 BUCKINGHAM DR TWIN FALLS, ID 83301																		
			3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>PRES</td> <td>SUSAN LOOSLI</td> <td>769 BUCKINGHAM</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>SECR</td> <td>DWANE LOOSLI</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table> DIRECTORS: SAME 2 INDIVIDUALS				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	PRES	SUSAN LOOSLI	769 BUCKINGHAM	TWIN FALLS	ID	83301	SECR	DWANE LOOSLI	"	"	"	"
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																
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SECR	DWANE LOOSLI	"	"	"	"																
5. Organized Under the Laws of: IDAHO C 137087	6.  Signature _____ Date <u>1-16-04</u> (Typed or Printed) Name <u>Susan L. Loosli</u> Title <u>Pres.</u>																				