

No. C 156419	Due no later than September 30, 2005		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	Annual Report Form		BYRON SPENCER													
	1. Mailing Address - Correct in this box, if applicable B & D TRANSPORT SERVICE INC. BYRON SPENCER 605 BLUE SKY DR KUNA, ID 83634		605 BLUE SKY DR KUNA, ID 83634 3. <u>New</u> Registered Agent Signature													
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="0"> <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>Byron Spencer</td> <td>605 Blue Sky Dr.</td> <td>Kuna</td> <td>ID</td> <td>83634</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Pres.	Byron Spencer	605 Blue Sky Dr.	Kuna	ID	83634
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
Pres.	Byron Spencer	605 Blue Sky Dr.	Kuna	ID	83634											
5. Organized Under the Laws of: IDAHO C 156419		6. Signature  Name (Typed or Printed) _____ Date <u>10/1/05</u> Title _____														

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