

|                                                                                                                                                        |             |                                                                                                                                                                 |       |                                                     |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-----------------------------------------------------|---------|-------------|--|
| No. <b>C 92391</b>                                                                                                                                     |             | Due no later than May 31, 2009                                                                                                                                  |       | 2. Registered Agent and Address <b>(NO PO BOX)</b>  |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |             | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>HONKS INC.<br>DARRELL COX<br>2752 S LIBERTY<br>BOISE ID 83709 |       | DARRELL COX<br>3520 WINDSOR DRIVE<br>BOISE ID 83705 |         |             |  |
|                                                                                                                                                        |             |                                                                                                                                                                 |       | 3. <u>New</u> Registered Agent Signature:*          |         |             |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |             |                                                                                                                                                                 |       |                                                     |         |             |  |
| Office Held                                                                                                                                            | Name        | Street or PO Address                                                                                                                                            | City  | State                                               | Country | Postal Code |  |
| PRESIDENT                                                                                                                                              | DARRELL COX | 2752 S. LIBERTY ST.                                                                                                                                             | BOISE | ID                                                  | USA     | 83709-3238  |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 92391</b>                                                                                           |             | 6. Annual Report must be signed.*<br>Signature: Darrell Cox<br>Name (type or print): Darrell Cox<br>Date: 06/05/2009<br>Title: President                        |       |                                                     |         |             |  |
| Processed 06/05/2009                                                                                                                                   |             | * Electronically provided signatures are accepted as original signatures.                                                                                       |       |                                                     |         |             |  |