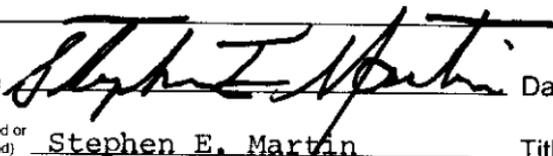


<p>No. W 4377</p> <p>Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080</p> <p>NO FILING FEE IF RECEIVED BY DUE DATE</p>	<p>Due no later than Jul 31, 2002</p> <p>Annual Report Form</p> <p>1. Mailing Address - Correct in this box, if applicable MARTIN & ESKELSON PLLC STEPHEN E MARTIN PO BOX 3189</p> <p>IDAHO FALLS, ID 83403</p>	<p>2. Registered Agent and Office NO PO BOX STEPHEN E MARTIN 425 S HOLMES</p> <p>IDAHO FALLS, ID 83401</p> <p>3. <u>New</u> Registered Agent Signature</p>																		
<p>4. Limited Liability Companies: Enter Names and Addresses of Managers.</p> <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>Member</td> <td>Stephen E. Martin</td> <td>P.O. Box 3189</td> <td>Idaho Falls</td> <td>ID</td> <td>83403</td> </tr> <tr> <td>Manager</td> <td>Stephen E. Martin</td> <td>P.O. Box 3189</td> <td>Idaho Falls</td> <td>ID</td> <td>83403</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>	Member	Stephen E. Martin	P.O. Box 3189	Idaho Falls	ID	83403	Manager	Stephen E. Martin	P.O. Box 3189	Idaho Falls	ID	83403
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<p>5. Organized Under the Laws of:</p> <p>IDAHO W 4377</p>	<p>6. Signature  Date <u>9/5/02</u></p> <p>Name <small>(Typed or Printed)</small> <u>Stephen E. Martin</u> Title <u>owner</u></p>																			