

BY: IDAHO SECRETARY OF STATE

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DEC-29-04 3:58PM;

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No. C 121159

Due no later than Oct 31, 2004  
Annual Report FormReturn to:  
SECRETARY OF STATE  
70 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

K.D.M. TOWING &amp; RECOVERY, INC.

PO BOX 9925

MOSCOW, ID 83843

2. Registered Agent and Office NO PO BOX

DON W MECHAM  
522 S BLAINE

MOSCOW, ID 83843

3. New Registered Agent Signature

NO FILING FEE IF

RECEIVED BY DUE DATE

Corporations. Enter Names and Business Addresses of President, Secretary and Directors.

| Office held | Name        | Street or P.O. Address | City   | State | Zip   |
|-------------|-------------|------------------------|--------|-------|-------|
| PRES        | DON MECHAM  | PO Box 9825            | MOSCOW | ID    | 83843 |
| SEC         | KATE MECHAM | PO Box 9825            | MOSCOW | ID    | 83843 |

Organized Under the Laws of:

IDAHO  
C 121159

Signature

Name Printed

*Don Mecham*  
Don MECHAM

Date

Title

12/27/04

Pres

Issued 12/29/2004 by SL1

Do Not Tape or Staple

Fold, seal and mail this portion

200410004645

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Detach at this perforation and discard this lower portion.

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- BLOCK 1:** Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.
- BLOCK 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.
- BLOCK 3:** Only a new registered agent must sign in Block 2.
- BLOCK 4:** Enter names and business addresses of president, secretary and directors (for corporations only) or managers/members (for LLC's only). Note: Putting "same as last year" or "same as above" will not be accepted. Changes here will not affect the address in Block 1.
- BLOCK 5:** May not be altered through the use of this form.
- BLOCK 6:** The annual report must be signed by a person authorized to represent the corporation/LLC. Print or type the name and title of the signer below the signature.

\*\* The Image of this form will be available on the Internet once it is filed. DO NOT enter Social Security Numbers. If the (corporation/Limited Liability Company) is no longer doing business in Idaho, you may file the appropriate form and fee. Forms are available on our website at [www.idsos.state.id.us](http://www.idsos.state.id.us). However, if no timely annual report is filed, administrative action will be taken, at no cost to the (corporation/Limited Liability Company), to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

POSTMARK DATES WILL NOT BE ACCEPTED