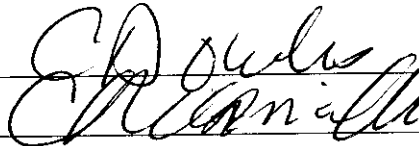
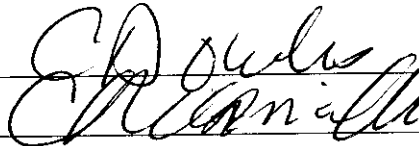
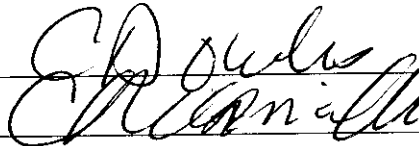


No. W 12031	Due no later than May 31, 2002 Annual Report Form	2. Registered Agent and Office NO PO BOX CHARMAINE R ALLEN 116 SOUTHPORT AVE LEWISTON, ID 83501												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable CDOWLS LTD. CO. CHARMAINE R ALLEN 116 SOUTHPORT AVE LEWISTON, ID 83501	3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Members. <table style="width: 100%; margin-top: 10px;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;">Managing member</td> <td style="vertical-align: top;">Charmaine Allen</td> <td style="vertical-align: top;">116 Southport Ave</td> <td style="vertical-align: top;">Lewiston,</td> <td style="vertical-align: top;">ID</td> <td style="vertical-align: top;">83501</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>	Managing member	Charmaine Allen	116 Southport Ave	Lewiston,	ID	83501
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>									
Managing member	Charmaine Allen	116 Southport Ave	Lewiston,	ID	83501									
5. Organized Under the Laws of: IDAHO W 12031	6. <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 60%;"> Signature  </td> <td style="width: 40%;"> Date 7-16-02 </td> </tr> <tr> <td> Name (Typed or Printed) </td> <td> Title Managing member </td> </tr> </table>		Signature 	Date 7-16-02	Name (Typed or Printed)	Title Managing member								
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