

No. C 125634	Due no later than September 30, 2003 Annual Report Form	2. Registered Agent and Office NO PO BOX DR. ALBERT W LIBKE 112 FRENCHMAN'S CT KETCHUM, ID 83340												
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. TRAIL CREEK TECHNOLOGY CORP. DR. ALBERT W LIBKE P O BOX 14001-425 KETCHUM, ID 83340	3. <u>New</u> Registered Agent Signature												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border: none;"> <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;"> Pres Sect. Director </td> <td style="vertical-align: top; font-size: 3em;">}</td> <td style="vertical-align: top;"> Al Libke M.D. P.O. Box 14001-425 Ketchum, ID </td> <td style="vertical-align: top;"> 83340 </td> <td></td> <td></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 Sect. Director	}	Al Libke M.D. P.O. Box 14001-425 Ketchum, ID	83340		
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>									
Pres Sect. Director	}	Al Libke M.D. P.O. Box 14001-425 Ketchum, ID	83340											
5. Organized Under the Laws of: IDAHO C 125634	6. Signature <u>Al Libke</u> Date <u>9-25-03</u> Name <small>(Typed or Printed)</small> <u>Albert W. Libke</u> Title <u>Pres Sect Director</u>													