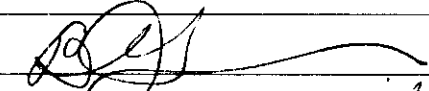
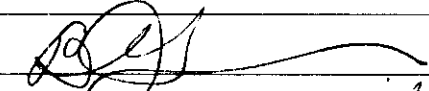
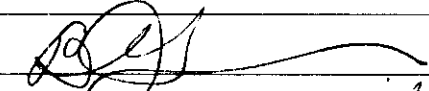


No. C 43684	Due no later than April 30, 2006 Annual Report Form		2. Registered Agent and Office NO PO BOX B. JOHN GALBRAITH 216 SOUTH PARK SUGAR CITY, ID 83448																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable EUROPA INTERNATIONAL, INC. B. JOHN GALBRAITH 216 SOUTH PARK P O BOX 94 SUGAR CITY, ID 83448		3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: left; width: 15%;"><u>Office held</u></th> <th style="text-align: left; width: 25%;"><u>Name</u></th> <th style="text-align: left; width: 35%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>B. John GALBRAITH</td> <td>216 So. Park</td> <td>Sugar City</td> <td>Id</td> <td>83448</td> </tr> <tr> <td>Secretary</td> <td>CAROL GALBRAITH</td> <td>PO BOX 94</td> <td>"</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>	President	B. John GALBRAITH	216 So. Park	Sugar City	Id	83448	Secretary	CAROL GALBRAITH	PO BOX 94	"	"	"
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Secretary	CAROL GALBRAITH	PO BOX 94	"	"	"																
5. Organized Under the Laws of: IDAHO C 43684		6. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 60%;">Signature </td> <td style="width: 40%;">Date Feb 15/06</td> </tr> <tr> <td>Name (Typed or Printed) B. John Galbraith</td> <td>Title President</td> </tr> </table>		Signature 	Date Feb 15/06	Name (Typed or Printed) B. John Galbraith	Title President														
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