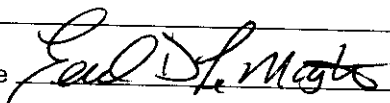
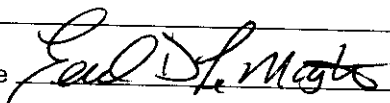
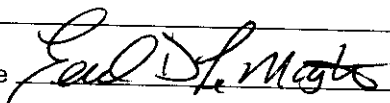


No. C 131968 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than Jan 31, 2001 Annual Report Form 1. Mailing Address - Correct in this box, if applicable DESERT WIND COVEN, INC. PO BOX 487 FILER, ID 83328	2. Registered Agent and Office NO PO BOX EARL D LEMASTER 713 UNION AVE FILER, ID 83328 3. <u>New</u> Registered Agent Signature
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4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Earl D. LeMaster	P.O. Box 487	Filer	ID	83328
Secretary	Amy D. LeMaster	P.O. Box 487	Filer	ID	83328
Director	Earl D. LeMaster	P.O. Box 487	Filer	ID	83328

5. Organized Under the Laws of: <div style="text-align: center;">IDAHO C 131968</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature  </td> <td style="width: 40%;"> Date <u>12-11-00</u> </td> </tr> <tr> <td> Name <small>(Type or Printed)</small> <u>Earl D. LeMaster</u> </td> <td> Title: <u>President</u> </td> </tr> </table>	Signature 	Date <u>12-11-00</u>	Name <small>(Type or Printed)</small> <u>Earl D. LeMaster</u>	Title: <u>President</u>
Signature 	Date <u>12-11-00</u>				
Name <small>(Type or Printed)</small> <u>Earl D. LeMaster</u>	Title: <u>President</u>				