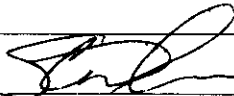


| No. <b>C 154424</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Due no later than April 30, 2006</b>                                                                                                                                                    |                               | 2. Registered Agent and Office <b>NO PO BOX</b>                                                                 |                    |             |                               |             |              |            |           |               |                   |          |    |       |           |                |                   |          |    |       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------------------------------------------------------------------------------------|--------------------|-------------|-------------------------------|-------------|--------------|------------|-----------|---------------|-------------------|----------|----|-------|-----------|----------------|-------------------|----------|----|-------|
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>Annual Report Form</b>                                                                                                                                                                  |                               |                                                                                                                 |                    |             |                               |             |              |            |           |               |                   |          |    |       |           |                |                   |          |    |       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 1. Mailing Address - Correct in this box, if applicable<br><br>KAMLOOP ENTERPRISES, INC.<br>STEVEN S COFFMAN<br>204 N TRIANGLE DR<br>PONDERAY, ID 83852                                    |                               | STEVEN S COFFMAN<br>420 GROUSE HOLLOW RD<br>SANDPOINT, ID 83864<br><br>3. <u>New</u> Registered Agent Signature |                    |             |                               |             |              |            |           |               |                   |          |    |       |           |                |                   |          |    |       |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.<br><table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Steve Coffman</td> <td>204 N TRIANGLE DR</td> <td>Ponderay</td> <td>ID</td> <td>83852</td> </tr> <tr> <td>Secretary</td> <td>Kristy Gehling</td> <td>204 N TRIANGLE DR</td> <td>Ponderay</td> <td>ID</td> <td>83852</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 | Steve Coffman | 204 N TRIANGLE DR | Ponderay | ID | 83852 | Secretary | Kristy Gehling | 204 N TRIANGLE DR | Ponderay | ID | 83852 |
| <u>Office held</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <u>Name</u>                                                                                                                                                                                | <u>Street or P.O. Address</u> | <u>City</u>                                                                                                     | <u>State</u>       | <u>Zip</u>  |                               |             |              |            |           |               |                   |          |    |       |           |                |                   |          |    |       |
| President                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Steve Coffman                                                                                                                                                                              | 204 N TRIANGLE DR             | Ponderay                                                                                                        | ID                 | 83852       |                               |             |              |            |           |               |                   |          |    |       |           |                |                   |          |    |       |
| Secretary                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Kristy Gehling                                                                                                                                                                             | 204 N TRIANGLE DR             | Ponderay                                                                                                        | ID                 | 83852       |                               |             |              |            |           |               |                   |          |    |       |           |                |                   |          |    |       |
| 5. Organized Under the Laws of:<br><br>IDAHO<br>C 154424                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 6. Signature <br>Name (Typed or Printed) <u>Steve Coffman</u> Title <u>President</u> Date <u>4/15/06</u> |                               |                                                                                                                 |                    |             |                               |             |              |            |           |               |                   |          |    |       |           |                |                   |          |    |       |

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