	Due no later than March 31, 2008  Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to:	1: Mailing Address - Correct in this box, if applicable	MICHAEL J MIKESELL
SECRETARY OF STATE 450 NORTH FOURTH STREET	· · · · · · · · · · · · · · · · · · ·	510 N BROADWAY
PO BOX 83720	K-M REFRIGERATION, INC. MICHAEL J MIKESELL	BLACKFOOT, ID 83221
BOISE, ID 83720-0080	510N BROADWAY	
30,02, 13 00,25 0000	BLACKFOOT, ID 83221	
NO FILING FEE IF		3. New Registered Agent Signature
RECEIVED BY DUE DATE		
	or and Pusiness Address	
	es and Business Addresses of President, Secret	ary and Directors.
Office held Name	Street or P.O. Address City	/ State 7in
President Michael N	likusell 7546 Nicholas Dr. 131	ack-but 10 83221
Sec/Treas Kalesun	Milesell 756 Nicholas Dr. R	ACKFOOT 10 83221
5. Organized Under the Laws of:		
5. Organized Under the Laws of:	6. Roleen Mukesa	200 3117/00
IDAHO	Signature Kallen Mikese	ell Date 3/17/08
	8. Signature Kaleen Mikese Name (Typod or KAGEN MIKESE	210 Date 3/17/08 11 Title SEC /Treas.

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