No. C 136662		Due no later than Dec 31, 2007 Annual Report Form 1. Mailing Address: Correct in this box if needed. TXOKO ONA, INC. TONY R URANGA PO BOX 1163 HOMEDALE ID 83628 USA		2. Registered Ag	Registered Agent and Address (NO PO BOX) TONY URANGA 2596 S WERER RAPIDS LM MERIDIAN ID 83642 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE								
				3. <u>New</u> Register				
4. Corporations: Enter Na	mes and Busin	ess Addresses of Presi	ident, Secretary, and Directors. Treasur	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY	MARY JO LARZELIER		2676 DURANGO DRIVE	HOMEDALE	ID	USA	83628	
DIRECTOR	MARC ASUMENDI		P.O. BOX 156	HOMEDALE	ID	USA	83628	
DIRECTOR	ANDREA BURCH		11175 W. MISSION PONTE DR	NAMPA	ID	USA	83651	
PRESIDENT	JOHN I. LEJARDI		229 EAST COLORADO AVENUE	HOMEDALE	ID	USA	83628	
DIRECTOR	DANIEL A URANGA		PO BOX 626	HOMEDALE	ID	USA	83628	
DIRECTOR	BEN BADIOLA		3783 US HIGHWAY 95	HOMEDALE	ID	USA	83628	
DIRECTOR	CTOR STAN ZATICA		PO BOX 2011	HOMEDALE	ID	USA	83628	
DIRECTOR	FRED EGUR	ROLA	3990 JOHNSTONE ROAD	HOMEDALE	ID	USA	83628	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 136662		Signature: John I. Lejardi			Date: 10/30/2007			
		Name (type or print): John I. Lejardi			Title: President			
Processed 10/30/2007		* Electronically provided signatures are accepted as original signatures.						