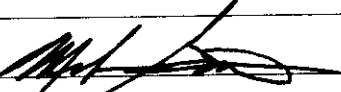


<b>No. C 59168</b>	<b>Due no later than Aug 31, 2003</b> <b>Annual Report Form</b>	2. Registered Agent and Office <b>NO PO BOX</b>  MICHAEL S GRIGGS 2668 DESERT DR  IDAHO FALLS, ID 83404																								
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address - Correct in this box, if applicable  G & A CORP.  PO BOX 2165  IDAHO FALLS, ID 83403	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; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td>PRES.</td> <td>MICHAEL S GRIGGS</td> <td>2668 DESERT</td> <td>IF</td> <td>ID</td> <td>83404</td> </tr> <tr> <td>SEC</td> <td>JULIE M GRIGGS</td> <td>2668 DESERT</td> <td>IF</td> <td>ID</td> <td>83404</td> </tr> <tr> <td>DIRECTOR</td> <td>SUSAN SCHEAR</td> <td>1145 N FALL RIVER RD</td> <td>IF</td> <td>ID</td> <td>83401</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	PRES.	MICHAEL S GRIGGS	2668 DESERT	IF	ID	83404	SEC	JULIE M GRIGGS	2668 DESERT	IF	ID	83404	DIRECTOR	SUSAN SCHEAR	1145 N FALL RIVER RD	IF	ID	83401
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5. Organized Under the Laws of:  <div style="text-align: center;">IDAHO C 59168</div>	6. Signature  Date <u>9/22/03</u>  Name <small>(Typed or Printed)</small> <u>MICHAEL S GRIGGS</u> Title <u>PRES.</u>																									