

No. W 45794		Due no later than December 31, 2006 Annual Report Form		2. Registered Agent and Office NO PO BOX	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address - Correct in this box, if applicable		JOHN BEUKERS 378 FALLS AVE TWIN FALLS, ID 83301 3031 N 3500 E Kimberly 1083341	
NO FILING FEE IF RECEIVED BY DUE DATE		CALT TAXI, LLC 878 FALLS AVE TWIN FALLS, ID 83301 3031 N 3500 E Kimberly 1083341		3. New Registered Agent Signature	
4. Limited Liability Companies: Enter Names and Addresses of Members.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
	Member John Beukers	711 Riverview Dr	TF	ID	83301
	Dan Beukers	1195 Bitterroot Dr	TF	ID	83301
	-member				
5. Organized Under the Laws of:		6.			
IDAHO W 45794		Signature <u>[Signature]</u>		Date <u>10/10/06</u>	
		Name (Typed or Printed) <u>H. Fiala</u>		Title <u>Officer</u>	

Issued 10/02/2006

Do Not Tape or Staple

200612000452