

No. <b>W 4383</b>	Due no later than Jul 31, 2002		2. Registered Agent and Office <b>NO PO BOX</b>																								
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>	Annual Report Form		MIKE CLEARY																								
	1. Mailing Address - Correct in this box, if applicable		12021 W TIDEWATER DR																								
	M & R MARKETING L.L.C. MIKE CLEARY 12021 W TIDEWATER DR  BOISE, ID 83713 6639		BOISE, ID 83713 6639																								
			3. <u>New</u> Registered Agent Signature																								
4. Limited Liability Companies: Enter Names and Addresses of Managers.																											
<table border="0"> <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>Mike Cleary</td> <td>12021 W Tidewater DR</td> <td>Boise</td> <td>ID</td> <td>83713</td> </tr> <tr> <td>Manager</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>asst manager</td> <td>Rochelle Cleary</td> <td>12021 W Tidewater DR</td> <td>Boise</td> <td>ID</td> <td>83713</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	Mike Cleary	12021 W Tidewater DR	Boise	ID	83713	Manager						asst manager	Rochelle Cleary	12021 W Tidewater DR	Boise	ID	83713
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5. Organized Under the Laws of:  IDAHO  W 4383	6. Signature <u>Mike Cleary</u> Date <u>5-10-02</u> Name (Typed or Printed) <u>Mike Cleary</u> Title <u>Pres + Manager</u>																										