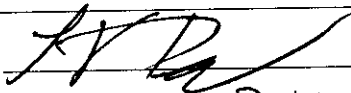


No. C 89619	Due no later than Jun 30, 2002 Annual Report Form		2. Registered Agent and Office NO PO BOX THOMAS V PUKA 128 BLUE LAKES BLVD. TWIN FALLS, ID 83301																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable THOMAS V. PUKA, CO. THOMAS V PUKA 128 BLUE LAKES BLVD. TWIN FALLS, ID 83301		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>owner pres</td> <td>Thomas Puka</td> <td>128 Blue Lakes</td> <td>Twin Falls</td> <td>Id</td> <td>83301</td> </tr> <tr> <td>sec</td> <td>Mayorie Puka</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	owner pres	Thomas Puka	128 Blue Lakes	Twin Falls	Id	83301	sec	Mayorie Puka	"	"	"	"
Office held	Name	Street or P.O. Address	City	State	Zip																
owner pres	Thomas Puka	128 Blue Lakes	Twin Falls	Id	83301																
sec	Mayorie Puka	"	"	"	"																
5. Organized Under the Laws of: <div style="text-align: center;">IDAHO C 89619</div>		6. Signature  Date <u>4-5-02</u> Name <small>(Typed or Printed)</small> <u>Thomas Puka</u> Title <u>owner/pres</u>																			