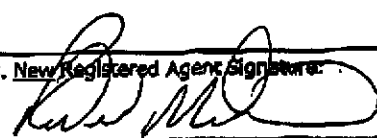
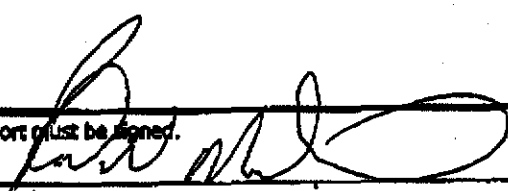
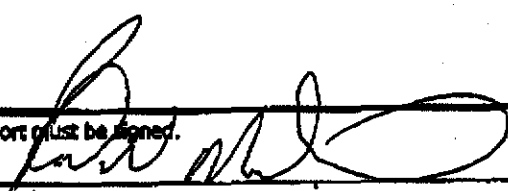
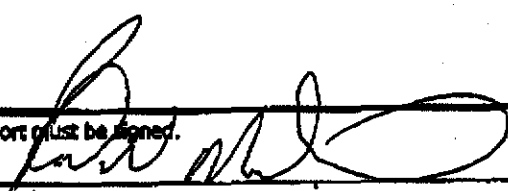


Generated Annual Report.

Page 1 of 1

No. C 82889		Due no later than 1/31/2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)													
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. ROCKFORD REPAIR INC. GARY MICHAELSON 1193 W. HWY 39 BLACKFOOT ID 83221		RODNEY W MICHAELSON 1193 W HIGHWAY 39 BLACKFOOT ID 83221													
				3. New Registered Agent Signature: 													
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.																	
<table border="1"><thead><tr><th>Office Held</th><th>Name</th><th>Street or PO Address</th><th>City</th><th>State</th><th>Zip</th></tr></thead><tbody><tr><td>President</td><td>Rodney W Michaelson</td><td>1193 W Hwy 39</td><td>Blackfoot</td><td>ID</td><td>83221</td></tr></tbody></table>						Office Held	Name	Street or PO Address	City	State	Zip	President	Rodney W Michaelson	1193 W Hwy 39	Blackfoot	ID	83221
Office Held	Name	Street or PO Address	City	State	Zip												
President	Rodney W Michaelson	1193 W Hwy 39	Blackfoot	ID	83221												
5. Organized Under the Laws of: ID C 82889		6. Annual Report must be signed. <table border="1"><tr><td>Signature: </td><td>Date: 2-6-09</td></tr><tr><td>Name (type or print): Rodney W Michaelson</td><td>Title: President</td></tr></table>				Signature: 	Date: 2-6-09	Name (type or print): Rodney W Michaelson	Title: President								
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