No. <b>W 2790</b>	Due no later than Aug 31, 2008		2. Registered Agent and Address (NO PO BOX)				
Return to:	Annual Report Form		DAVID C VAN ENGELEN 134 3RD AVE E TWIN FALLS ID 83301				
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.						
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	VAN ENGELEN CPAS & CO., P.L.L.C. DAVID C VAN ENGELEN P. O. BOX 5377 139 RIVER VISTA PLACE STE 102						
			3. <u>New</u> Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE	TWIN FALLS ID 83	TWIN FALLS ID 83303-5377					
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER DAVID C VAN ENGELEN		P. O. BOX 5377 139 RIVER VISTA PLACE STE 102	TWIN FALLS	ID	USA	83303-5377	
5. Organized Under the Laws of: 6. Annual Report must be signed.		be signed.*					
ID	Signature: David C Van Engelen		Date: 09/17/2008				
W 2790 Name (type or print)		): David C Van Engelen	Title: Ceo				
Processed 09/17/2008	* Electronically provided signatures are accepted as original signatures.						