

No. W 20491	Due no later than August 31, 2003 Annual Report Form	2. Registered Agent and Office NO PO BOX RAOL KAKARIA 5165 N RIVERFRONT DR BOISE, ID 83703 83714																		
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 ROK TECHNOLOGY L.L.C. 5165 N RIVERFRONT DR BOISE, ID 83703 83714	3. New Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; border-bottom: 1px solid black;">Office held</th> <th style="text-align: center; border-bottom: 1px solid black;">Name</th> <th style="text-align: center; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: center; border-bottom: 1px solid black;">City</th> <th style="text-align: center; border-bottom: 1px solid black;">State</th> <th style="text-align: center; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">Manager</td> <td>Rael Kakaria</td> <td>5165 N Riverfront Dr.</td> <td>Boise</td> <td>Idaho</td> <td>83714</td> </tr> <tr> <td style="text-align: center;">Manager</td> <td>Karla Kakaria</td> <td>5165 N. Riverfront Dr.</td> <td>Boise</td> <td>Idaho</td> <td>83714</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	Manager	Rael Kakaria	5165 N Riverfront Dr.	Boise	Idaho	83714	Manager	Karla Kakaria	5165 N. Riverfront Dr.	Boise	Idaho	83714
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5. Organized Under the Laws of: IDAHO W 20491	6. Signature <u>Rael Kakaria</u> Date <u>8/26/03</u> Name (Typed or Printed) <u>Rael Kakaria</u> Title <u>Manager</u>																			