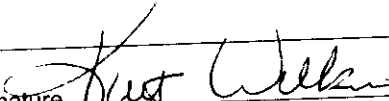


No. W 18854	Due no later than Apr 30, 2003 Annual Report Form		2. Registered Agent and Office NO PO BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address. Correct in this box if applicable. VIRTUAL INCOME, LLC ATTN KURT WILKINS 391 W STATE ST STE C EAGLE, ID 83616		ROBERT C MONTGOMERY CHTD 355 W MYRTLE #102 BOISE, ID 83702 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>Manager</td> <td>Kurt Wilkins</td> <td>P.O. Box 3300</td> <td>Eagle</td> <td>IDAH</td> <td>83616</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>	Manager	Kurt Wilkins	P.O. Box 3300	Eagle	IDAH	83616
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
Manager	Kurt Wilkins	P.O. Box 3300	Eagle	IDAH	83616											
5. Organized Under the Laws of: IDAHO W 18854		6.  Signature _____ Date <u>2/13/03</u> Name (Typed or Printed) <u>Kurt Wilkins</u> Title <u>Manager</u>														