| No. C 54857 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Due | 2. Registered A | 2. Registered Agent and Address (NO PO BOX) BARBARA CRAVEN 12997 W. STAGE COACH RD. NAMPA ID 83686 3. New Registered Agent Signature:* | | | |
|---|----------------------|---|--|--|------------------|---------|-------------|
| | | Annual Report Form 1. Mailing Address: Correct in this box if needed. B.M.K., INC. BARBARA CRAVEN 12997 WEST STAGE COACH RD. NAMPA ID 83686-9133 | | | | | |
| 4. Corporations: Enter Nam | nes and Busin | ess Addresses of P | resident, Secretary, and Directors. Treasu | rer (optional). | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code |
| DIRECTOR | TOR KARRIE HOLM | | 18700 KOSICH DR | SARATOGA | CA | USA | 95070 |
| DIRECTOR MARK CLEMI | | ENTS | 8634 DEER FLAT | NAMPA | ID | USA | 83686 |
| SECRETARY MATTHEW C | | CLEMENTS | 12035 W STAGECOACH RD | NAMPA | ID | USA | 83686 |
| PRESIDENT | IDENT BARBARA CRAVEN | | 12997 W STAGECOACH RD | NAMPA | ID | USA | 83686 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID C 54857 | | Signature: Barbara Craven | | | Date: 11/23/2008 | | |
| | | Name (type or print): Barbara Craven | | | Title: President | | |
| Processed 11/23/2008 | | * Electronically provided signatures are accepted as original signatures. | | | | | |