

|                                                                                                                                                        |                |                                                                                                                                                                                    |       |                                                           |                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-----------------------------------------------------------|---------------------|
| No. <b>W 40149</b>                                                                                                                                     |                | Due no later than Jun 30, 2006                                                                                                                                                     |       | 2. Registered Agent and Address <b>(NO PO BOX)</b>        |                     |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>C2 TECHNOLOGIES LLC<br>CASEY CRUMRINE<br>12499 W RUTHERFORD CT<br>BOISE ID 83709 |       | CASEY CRUMRINE<br>12499 W RUTHERFORD CT<br>BOISE ID 83709 |                     |
|                                                                                                                                                        |                |                                                                                                                                                                                    |       | 3. <u>New</u> Registered Agent Signature:*                |                     |
| 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                                                                                                                                                 | CASEY CRUMRINE | 12499 W RUTHERFORD CT                                                                                                                                                              | BOISE | ID                                                        | 83709               |
| 5. Organized Under the Laws of:<br><br><b>IDAHO<br/>W 40149</b>                                                                                        |                | 6. Annual Report must be signed.*<br>Signature: Casey Crumrine<br>Name (type or print): Casey Crumrine<br>Date: 05/13/2006<br>Title: Member                                        |       |                                                           |                     |
| Processed 05/13/2006                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                                          |       |                                                           |                     |