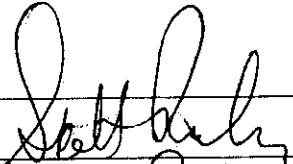


No. C 103266	Due no later than September 30, 2005 Annual Report Form	2. Registered Agent and Office NO PO BOX KATHLEEN ROMA 11473 W COLONY BOISE, ID 83709
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable SPECIALTY FULFILLMENT CENTER, INC. KATHLEEN ROMA 17TH AVE SOUTH #3 NAMPA, ID 83651	3. <u>New</u> Registered Agent Signature
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.		
<u>Office held</u> President	<u>Name</u> Scott Richey	<u>Street or P.O. Address</u> 11473 W Colony
		<u>City</u> Boise
		<u>State</u> ID
		<u>Zip</u> 83709
5. Organized Under the Laws of: IDAHO C 103266	6. Signature  Name (Typed or Printed) <u>Scott Richey</u>	
	Date <u>7/15/05</u> Title <u>President</u>	

Issued 07/05/2005

Do Not Tape or Staple

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