Annual Devent Form	2. Registered Agent and Office NO PO BOX
K LOGIC, INC. FLETCHER DR	KRISTEN BORROWMAN 711 FLETCHER DR NAMPA, ID 83686
	3. New Registered Agent Signature
nd Business Addresses of President, Secreta	ary and Directors.
Street or P.O. Address City	<u>State</u> <u>Zip</u>
6. Signature	Date 10 18 12004
Name (Typed or Kristen Borrowma	in Title registered agent
Do Not Tape or Staple	20041003621
	*
	6. Signature Manner Dr. Name Printed or Kristen Borrowmo

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