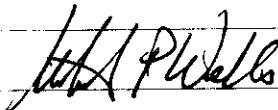


No. C 151871	Due no later than November 30, 2004 Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable		MICHAEL P WELLS 438 HWY 55 HORSESHOE BEND, ID 83629												
	CASTLEROCK CUSTOM CABINETS INC 121 PINE GAP RD HORSESHOE BEND, ID 83629														
3. New Registered Agent Signature															
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <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>President</td> <td>Michael Wells</td> <td>121 Pine Gap Rd</td> <td>Horseshoe Bend</td> <td>ID</td> <td>83629</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>	President	Michael Wells	121 Pine Gap Rd	Horseshoe Bend	ID	83629
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
President	Michael Wells	121 Pine Gap Rd	Horseshoe Bend	ID	83629										
5. Organized Under the Laws of: IDAHO C 151871		6. Signature  Date 11/10/04 Name <small>(Typed or Printed)</small> Michael Wells Title President													

Issued 09/01/2004

Do Not Tape or Staple

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