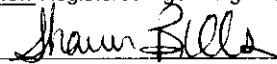
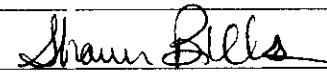
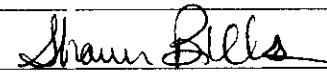
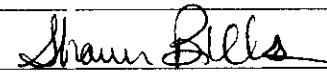


No. C 145890	Due no later than October 31, 2003 Annual Report Form	2. Registered Agent and Office NO PO BOX GREGORY JEHARDT 2677 E 17TH ST STE 400 IDAHO FALLS, ID 83406																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box if applicable S.O.A.R., INC. 460 W FIR SHELLEY, ID 83274	3. New Registered Agent Signature 																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; margin-top: 10px;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Shawn K Bills</td> <td>550 2nd St Suite 259</td> <td>Idaho Falls</td> <td>ID</td> <td>83401</td> </tr> <tr> <td>Vice President</td> <td>Sharon Bills</td> <td>550 2nd St Suite 259</td> <td>Idaho Falls</td> <td>ID</td> <td>83401</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	Shawn K Bills	550 2nd St Suite 259	Idaho Falls	ID	83401	Vice President	Sharon Bills	550 2nd St Suite 259	Idaho Falls	ID	83401
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Vice President	Sharon Bills	550 2nd St Suite 259	Idaho Falls	ID	83401															
5. Organized Under the Laws of: <div style="text-align: center;">IDAHO C 145890</div>	6. <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 50%;">Signature </td> <td style="width: 50%;">Date <u>8-18-03</u></td> </tr> <tr> <td>Name (Typed or Printed) <u>Shawn K Bills</u></td> <td>Title <u>President</u></td> </tr> </table>		Signature 	Date <u>8-18-03</u>	Name (Typed or Printed) <u>Shawn K Bills</u>	Title <u>President</u>														
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