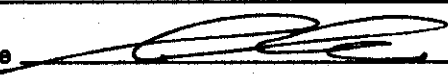


No. W 25877	Due no later than September 30, 2007 Annual Report Form		2. Registered Agent and Office NO PO BOX GEORGE P AMBROSE 4050 NORTH 2100 EAST FILER, ID 83328
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable MXTWF, LLC PO BOX 774 FILER, ID 83328		3. New Registered Agent Signature
4. Limited Liability Companies: Enter Names and Addresses of Managers.			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>
MANAGER	GEORGE AMBROSE	P.O. BOX 774	FILER
MEMBER	MARTHA AMBROSE	P.O. BOX 774	FILER
			IDAHO 83328
			IDAHO 83328
5. Organized Under the Laws of: IDAHO W 25877		6. Signature  Date <u>7/30/07</u> Name <small>(Typed or Printed)</small> <u>GEORGE AMBROSE</u> Title <u>MANAGER</u>	

Issued 07/02/2007

Do Not Tape or Staple

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