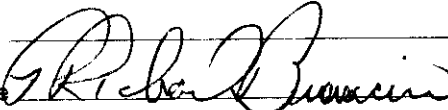


<p><b>No. W 26413</b></p> <p>Return to:          SECRETARY OF STATE          700 WEST JEFFERSON          PO BOX 83720          BOISE, ID 83720-0080</p> <p><b>NO FILING FEE IF          RECEIVED BY DUE DATE</b></p>	<p align="center"><b>Due no later than October 31, 2004          Annual Report Form</b></p> <p><b>1. Mailing Address - Correct in this box, if applicable:</b></p> <p>BUONACCORSI LLC          P O BOX 5844          CARMEL, CA 93921</p>	<p>2. Registered Agent and Office <b>NO PO BOX</b></p> <p>DOROTHY JEAN MCKINNEY          603 S OWYHEE          BOISE, ID 83705</p> <p>3. <u>New</u> Registered Agent Signature</p>																		
<p>4. Limited Liability Companies: Enter Names and Addresses of Managers.</p> <table border="1"> <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>manager</td> <td>P. Richard Buonaccorsi</td> <td>Box 5844</td> <td>Carmel</td> <td>CA</td> <td>93921</td> </tr> <tr> <td>manager</td> <td>Kathleen M. Buonaccorsi</td> <td>Box 5844</td> <td>Carmel</td> <td>CA</td> <td>93921</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>	manager	P. Richard Buonaccorsi	Box 5844	Carmel	CA	93921	manager	Kathleen M. Buonaccorsi	Box 5844	Carmel	CA	93921
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<p>5. Organized Under the Laws of:</p> <p>IDAHO          W 26413</p>	<p>6. Signature  Date <u>9/1/04</u></p> <p>Name (Typed or Printed) <u>P. RICHARD BUONACCORSI</u> Title <u>MANAGER</u></p>																			