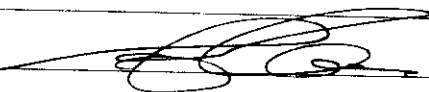


<b>No. W 25874</b> Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>Due no later than September 30, 2004 Annual Report Form</b> 1. Mailing Address - Correct in this box, if applicable  MXSMF, LLC PO BOX 774 FILER, ID 83328	2. Registered Agent and Office <b>NO PO BOX</b>  GEORGE P AMBROSE 4050 NORTH 2100 EAST FILER, ID 83328  3. <u>New</u> Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table style="width: 100%; border-collapse: collapse;"> <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>MANAGER</td> <td>GEORGE AMBROSE</td> <td>P.O. BOX 774</td> <td>FILER</td> <td>IDAHO</td> <td>83328</td> </tr> <tr> <td>MEMBER</td> <td>MARTHA AMBROSE</td> <td>P.O. BOX 774</td> <td>FILER</td> <td>IDAHO</td> <td>83328</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	GEORGE AMBROSE	P.O. BOX 774	FILER	IDAHO	83328	MEMBER	MARTHA AMBROSE	P.O. BOX 774	FILER	IDAHO	83328
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MEMBER	MARTHA AMBROSE	P.O. BOX 774	FILER	IDAHO	83328															
5. Organized Under the Laws of:  <div style="text-align: center;">IDAHO W 25874</div>	6. Signature  Date <u>8-5-04</u> Name <small>(Typed or Printed)</small> <u>GEORGE AMBROSE</u> Title <u>MANAGER</u>																			

Issued 07/01/2004

**Do Not Tape or Staple**

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