
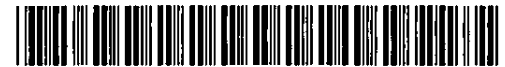


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # F00000000607</b> 1. Entity Name SNOLINE EXPRESS, INC.	
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Principal Place of Business 303 ROEDEL AVE CALDWELL, ID 83605	Mailing Address 303 ROEDEL AVE CALDWELL, ID 83605
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01192007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 82-0435728	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  
  
KOWALSKY, TED  
1758 NW 82 AVE.,  
MIAMI, FL 33196

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be</b> <b>Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD DIEBEL, EVA LOU C 1130 ORCHARD LOOP ROAD TROY, ID 83871
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DIEBEL, E. BOYD 1130 ORCHARD LOOP ROAD TROY, ID 83871
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SWANK, KIM 303 ROEDEL AVENUE CALDWELL, ID 83605
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000750526  
05/18/07-80065-015 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**  **Eva Lou C. DIEBEL,** **4/11/07 (207) 453-2786**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
**FRES.**