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Colorado Secretary of State

Date and Time: 07/12/2007 04:43 PM

Id Number: 20021117993

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## **Annual Report**

filed pursuant to §7-90-301, et seq. and §7-90-501 of the Colorado Revised Statutes (C.R.S)

| •  | •           |
|--|-------------|
| ID number:   | 20021117993 |
| Entity name:   | SYMKA,INC.  |
| Jurisdiction under the law of which the entity was formed or registered: | Colorado    |
|  |             |

## You must complete line 1.

Notice:

Causing this document to be delivered to the secretary of state for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that the document is the individual's act and deed, or that the individual in good faith believes the document is the act and deed of the person on whose behalf the individual is causing the document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S., the constituent documents, and the organic statutes, and that the individual in good faith believes the facts stated in the document are true and the document complies with the requirements of that Part, the constituent documents, and the organic statutes.

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| Freischlag                 | Corinna               | С                   |          |
|----------------------------|-----------------------|---------------------|----------|
| (Last)                     | (First)               | (Middle)            | (Suffix) |
| 3107 W Colorado A          | Ave                   |                     |          |
| (Street name an            | d number or Post Offi | ce Box information) |          |
| Colorado Springs           | СО                    | 80904               |          |
| (City)                     | (State)               | (Postal/Zip Co      | ode)     |
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(The document need not state the true name and address of more than one individual. However, if you wish to state the name and address of any additional individuals causing the document to be delivered for filing, mark this box and include an attachment stating the name and address of such individuals.)

| 2. Principal office street address:                            | 2845 Ore Mill Road   | A-8                       |        |                         |         |
|--|--|---------------------------|--------|-------------------------|---------|
|  | (Street name and number)   |                           |        |                         |         |
|  | Colorado Springs   | СО                        | 80     | 904                     |         |
|  | (City)   | United St                 | ates   | (Postal/Zip Code)       |         |
|  | (Province – if applicable)   | (Country – if n           | ot US) |                         |         |
| 3. Principal office mailing address: (if different from above) | 3107 W. Colorado A   |                           |        |                         |         |
|  | Ste 109 <sup>(Street name and number or Post Office Box information)</sup> |                           |        |                         |         |
|  | Colorado Springs   | CO                        | 808    | 904                     |         |
|  | (City)   | United St                 | ates   | (Postal/Zip Code)       |         |
|  | (Province – if applicable)   | (Country – if n           | ot US) |                         |         |
| 4. Registered agent name: (if an individual)                   | FREISCHLAG   | CORINNA                   | C.     |                         |         |
|  | (Last)   | (First)                   |        | (Middle)                | (Suffix |
| <b>OR</b> (if a business organization)                         |  |                           |        |                         |         |
| 5. The person identified above as registere                    | d agent has consented to b   | peing so appoint          | ed.    |                         |         |
| 6 Registered agent street address:                             | 3107 W. Colorado Ave.  |                           |        |                         |         |
| 6. Registered agent street address:                            | 3107 W. Colorado A   | ∖ve.                      |        |                         |         |
| 6. Registered agent street address:                            |  | Ave. set name and number, | )      |                         |         |
| 6. Registered agent street address:                            | (Stra  | eet name and number       | 809    | 04                      |         |
| 6. Registered agent street address:                            | Ste 109  | eet name and number       |        | 04<br>(Postal/Zip Code) |         |
|  | Ste 109  COLORADO SPRIN  | NGS <u>CO</u>             | 809    | (Postal/Zip Code)       |         |
| 7. Registered agent mailing address:                           | Ste 109  COLORADO SPRIN  | NGS CO (State)            | 809    | (Postal/Zip Code)       |         |

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