

<b>No. W 5849</b>	<b>Due no later than March 31, 2004</b> <b>Annual Report Form</b>	2. Registered Agent and Office <b>NO PO BOX</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>		1. Mailing Address - Correct in this box, if applicable SMOKE INN, LLC JAY LILES 3912 W. STATE ST  BOISE, ID 83703	JAY K. LILES 3912 W. STATE ST  BOISE, ID 83703  3. <u>New</u> Registered Agent Signature											
4. Limited Liability Companies: Enter Names and Addresses of Managers.														
<table border="1"> <thead> <tr> <th data-bbox="355 414 495 440"><u>Office held</u></th> <th data-bbox="528 414 614 440"><u>Name</u></th> <th data-bbox="808 414 1045 440"><u>Street or P.O. Address</u></th> <th data-bbox="1304 414 1358 440"><u>City</u></th> <th data-bbox="1498 414 1563 440"><u>State</u></th> <th data-bbox="1670 414 1714 440"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td data-bbox="344 455 495 528"><del>Manager</del></td> <td data-bbox="517 450 657 497">Jay Liles</td> <td data-bbox="722 450 1110 486">7019 N. ROE 83714</td> <td data-bbox="1282 450 1379 492">Boise</td> <td data-bbox="1498 450 1563 486">Id</td> <td data-bbox="1638 435 1767 476">83703</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>	<del>Manager</del>	Jay Liles	7019 N. ROE 83714	Boise	Id	83703
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>									
<del>Manager</del>	Jay Liles	7019 N. ROE 83714	Boise	Id	83703									
5. Organized Under the Laws of:  IDAHO W 5849	6. Signature <u>Jay Liles</u> Date <u>3-4-04</u> Name <small>(Typed or Printed)</small> <u>Jay Liles</u> Title <u>Owner</u>													