

No. L 5832

Due no later than March 31, 2008  
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:  
SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

BEN FATTO LIMITED PARTNERSHIP  
1223 S CLEARVIEW AVE STE 103  
MESA, AZ 85209

SYNERGY CORPORATE SERVICES INC  
4710 KOOTENAI ST  
BOISE, ID 83705

NO FILING FEE IF  
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Limited Partnerships: Enter Names and Business Addresses of General Partners.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
	Ben Fatto, LLC	1223 S Clearview Ave #103	Mesa, AZ		85209

5. Organized Under the Laws of:  
ARIZONA  
L 5832

6.

Signature

*Craig D. Cardon*

Date

*3/17/08*

Name

(Typed or  
Printed)

*Craig D. Cardon*

Title

*Manager*

Issued 01/02/2008

Do Not Tape or Staple

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