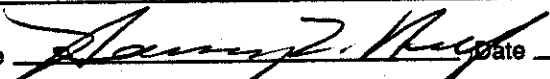


| No. C 111415 | Due no later than July 31, 2007 Annual Report Form | | 2. Registered Agent and Office NO PO BOX | | | | | | | | | | | |
|---|--|------------------------|---|-------------|-------|------------------------|------|-------|-----|-----|----------------|-------------------|-------|----|
| Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | 1. Mailing Address - Correct in this box, if applicable ADI - APPLIANCE DISTRIBUTING, INC. HARVEY NEEF 5430 W STATE BOISE, ID 83707 | | HARVEY NEEF 5430 W STATE BOISE, ID 83707 3. New Registered Agent Signature | | | | | | | | | | | |
| | 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>CEO</td> <td>HARVEY L. NEEF</td> <td>5430 W. STATE ST.</td> <td>BOISE</td> <td>ID</td> <td>83703</td> </tr> </tbody> </table> | | | Office held | Name | Street or P.O. Address | City | State | Zip | CEO | HARVEY L. NEEF | 5430 W. STATE ST. | BOISE | ID |
| Office held | Name | Street or P.O. Address | City | State | Zip | | | | | | | | | |
| CEO | HARVEY L. NEEF | 5430 W. STATE ST. | BOISE | ID | 83703 | | | | | | | | | |
| 5. Organized Under the Laws of: IDAHO C 111415 | 6. Signature  Date 5/10/07 Name (Typed or Printed) HARVEY L. NEEF Title CEO | | | | | | | | | | | | | |

Issued 05/01/2007

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