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|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|--------------------------------------------------------|---------------------|
| No. <b>W 27582</b>                                                                                                                                     |                  | <b>Due no later than Dec 31, 2006</b>                                                                                                                                                 |        | 2. Registered Agent and Address <b>(NO PO BOX)</b>     |                     |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                  | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>A CUT ABOVE PAINTING, LLC<br>TIMOTHY J MYLNAR<br>22 BUTTERCUP RD<br>HAILEY ID 83333 |        | TIMOTHY J MYLNAR<br>22 BUTTERCUP RD<br>HAILEY ID 83333 |                     |
|                                                                                                                                                        |                  |                                                                                                                                                                                       |        | 3. <u>New</u> Registered Agent Signature:*             |                     |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.                                                           |                  |                                                                                                                                                                                       |        |                                                        |                     |
| Office Held                                                                                                                                            | Name             | Street or PO Address                                                                                                                                                                  | City   | State                                                  | Country Postal Code |
| MEMBER                                                                                                                                                 | TIMOTHY J MYLNAR | 22 BUTTERCUP RD                                                                                                                                                                       | HAILEY | ID                                                     | 83333               |
| MEMBER                                                                                                                                                 | JOAN MYLNAR      | 22 BUTTERCUP RD                                                                                                                                                                       | HAILEY | ID                                                     | 83333               |
| 5. Organized Under the Laws of:<br><br><b>IDAHO<br/>W 27582</b>                                                                                        |                  | 6. Annual Report must be signed.*<br>Signature: Joan Mylnar<br>Name (type or print): Joan Mylnar<br>Date: 01/05/2007<br>Title: Treasurer                                              |        |                                                        |                     |
| Processed 01/05/2007                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                                                             |        |                                                        |                     |