

No. W 41479		Due no later than Jul 31, 2007		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. EDGE OPTICS LLC 329 S WOODRUFF AVE IDAHO FALLS ID 83401		CRANDALL & OSEEN PA 329 S WOODRUFF AVE IDAHO FALLS ID 83401	
				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
MANAGER	DR JERRY NAVE	2550 S 25TH E	IDAHO FALLS	ID	USA 83404
5. Organized Under the Laws of: ID W 41479		6. Annual Report must be signed.* Signature: Dr Jerry Nave Name (type or print): Dr Jerry Nave Date: 05/24/2007 Title: Manager			
Processed 05/24/2007		* Electronically provided signatures are accepted as original signatures.			