

No. W 52040	Due no later than June 30, 2007 Annual Report Form		2. Registered Agent and Office NO PO BOX PAULINE M DAHL 1510 S RIVERSIDE HARBOR DR POST FALLS, ID 83854												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable AESTHETIC CONCRETE COATINGS & INSUL PAULINE M DAHL 1510 S RIVERSIDE HARBOR DR POST FALLS, ID 83854		3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Owner</td> <td>Pauline M. Dahl</td> <td>1510 S. Riverside Harbor Dr.</td> <td>Post Falls</td> <td>ID</td> <td>83854</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>	Owner	Pauline M. Dahl	1510 S. Riverside Harbor Dr.	Post Falls	ID	83854
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
Owner	Pauline M. Dahl	1510 S. Riverside Harbor Dr.	Post Falls	ID	83854										
5. Organized Under the Laws of: IDAHO W 52040		6. Signature <u>Pauline M. Dahl</u> Date <u>4-12-07</u> Name (Typed or Printed) <u>Pauline M. Dahl</u> Title <u>owner/operator</u>													