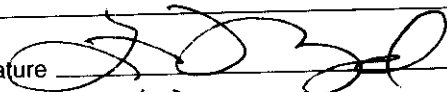
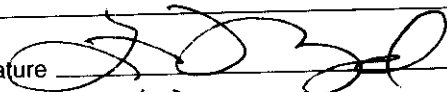
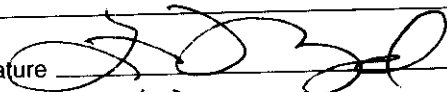


<b>No. W 37889</b>	<b>Due no later than March 31, 2006</b> <b>Annual Report Form</b>	2. Registered Agent and Office <b>NO PO BOX</b> MICHAEL MAYNARD 2676 DESERT DR IDAHO FALLS, ID 83404																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address - Correct in this box, if applicable</b> INNOVATIVE PRODUCTS GROUP, LLC 510 E 17TH ST STE 104 IDAHO FALLS, ID 83404	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; width: 15%;"><u>Office held</u></th> <th style="text-align: left; width: 25%;"><u>Name</u></th> <th style="text-align: left; width: 35%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td><del>President</del> Managing Member</td> <td>Michael Maynard</td> <td>510 E. 17<sup>th</sup> St. Ste. 104</td> <td>Idaho Falls</td> <td>ID</td> <td>83404</td> </tr> <tr> <td><del>President</del> Member</td> <td>Lisa Maynard</td> <td>510 E. 17<sup>th</sup> St. Ste. 104</td> <td>Idaho Falls</td> <td>ID</td> <td>83404</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>	<del>President</del> Managing Member	Michael Maynard	510 E. 17 <sup>th</sup> St. Ste. 104	Idaho Falls	ID	83404	<del>President</del> Member	Lisa Maynard	510 E. 17 <sup>th</sup> St. Ste. 104	Idaho Falls	ID	83404
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5. Organized Under the Laws of: <div style="text-align: center;">IDAHO W 37889</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">           Signature  </td> <td style="width: 40%;">           Date <u>1/9/06</u> </td> </tr> <tr> <td>           Name <small>(Typed or Printed)</small> <u>Lisa Maynard</u> </td> <td>           Title <u>Member</u> </td> </tr> </table>		Signature 	Date <u>1/9/06</u>	Name <small>(Typed or Printed)</small> <u>Lisa Maynard</u>	Title <u>Member</u>														
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