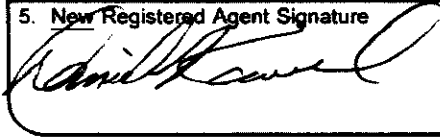
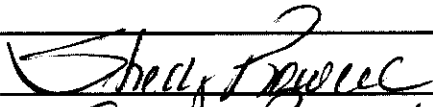


No. W 5593	Annual Report Form <i>Due No Later Than November 30,</i>		2. Registered Agent and Office NOT A P.O. BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct if Not Correct OMNI TRADE SHOW SERVICES, LLC MEL SNIDER DAN ROUELL 6477 FAIRVIEW AVE STE E 124 NW 10th #103 BOISE Meridian ID 83704 83642		MEL SNIDER DAN ROUELL 6477 FAIRVIEW AVE STE E 124 NW 10th #103 BOISE Meridian ID 83704 83642													
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input checked="" type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;"><u>Office held</u></td> <td style="text-align: center;"><u>Name</u></td> <td style="text-align: center;"><u>Street or P.O. Address</u></td> <td style="text-align: center;"><u>City</u></td> <td style="text-align: center;"><u>State</u></td> <td style="text-align: center;"><u>Zip</u></td> </tr> <tr> <td style="text-align: center;">MANAGER</td> <td style="text-align: center;">DAN ROUELL</td> <td style="text-align: center;">124 NW 10th #103</td> <td style="text-align: center;">Meridian</td> <td style="text-align: center;">ID</td> <td style="text-align: center;">83642</td> </tr> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	MANAGER	DAN ROUELL	124 NW 10th #103	Meridian	ID	83642	3. Organized Under the Laws of: ID W 5593	
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
MANAGER	DAN ROUELL	124 NW 10th #103	Meridian	ID	83642											
5. New Registered Agent Signature 		6. Signature  Date 1-4-00 Name (Typed or Printed) Shelly Powell Title Bookkeeper														