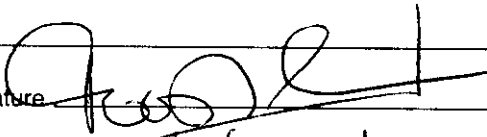


No. W 33921	Due no later than October 31, 2005		2. Registered Agent and Office NO PO BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form															
	1. Mailing Address - Correct in this box, if applicable ON-LINE AUCTION CONSULTANTS, LLC 149 N PLACER AVE IDAHO FALLS, ID 83402		JEFFERY K WARD 149 N PLACER AVE IDAHO FALLS, ID 83402 3. <u>New</u> Registered Agent Signature													
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;"><u>Office held</u></th> <th style="text-align: center;"><u>Name</u></th> <th style="text-align: center;"><u>Street or P.O. Address</u></th> <th style="text-align: center;"><u>City</u></th> <th style="text-align: center;"><u>State</u></th> <th style="text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">Manager</td> <td>Jeffery Ward</td> <td>149 N. Placer Ave</td> <td>Idaho Falls</td> <td>ID</td> <td>83402</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>	Manager	Jeffery Ward	149 N. Placer Ave	Idaho Falls	ID	83402
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
Manager	Jeffery Ward	149 N. Placer Ave	Idaho Falls	ID	83402											
5. Organized Under the Laws of: IDAHO W 33921		6.  Signature _____ Date <u>10/26/05</u> Name (Typed or Printed) <u>Jeffery Ward</u> Title <u>Manager</u>														

Issued 08/01/2005

Do Not Tape or Staple

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