

<b>No. W 12112</b>	<b>Due no later than Jun 30, 2001</b> <b>Annual Report Form</b>	2. Registered Agent and Office <b>NO PO BOX</b>
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable POWERS NU-LINE UPHOLSTERY LLC 9880 FAIRVIEW AVE BOISE, ID 83704	SHERRY LOU POWERS 9880 FAIRVIEW AVE BOISE, ID 83704
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		3. <u>New</u> Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.
 

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
OWNER	SHERRY L. POWERS	9880 FAIRVIEW AVE	BOISE	ID	83704

5. Organized Under the Laws of: <div style="text-align: center; margin-top: 20px;">             IDAHO W 12112           </div>	6. <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 60%;">Signature <u>Sherry L. Powers.</u></td> <td style="width: 40%;">Date <u>4-10-01</u></td> </tr> <tr> <td>Name (Typed or Printed) <u>SHERRY L. POWERS</u></td> <td>Title: <u>OWNER</u> <del>Time</del> XXXX</td> </tr> </table>	Signature <u>Sherry L. Powers.</u>	Date <u>4-10-01</u>	Name (Typed or Printed) <u>SHERRY L. POWERS</u>	Title: <u>OWNER</u> <del>Time</del> XXXX
Signature <u>Sherry L. Powers.</u>	Date <u>4-10-01</u>				
Name (Typed or Printed) <u>SHERRY L. POWERS</u>	Title: <u>OWNER</u> <del>Time</del> XXXX				