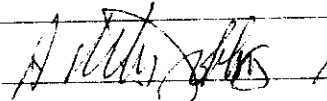


<b>No. W 15568</b>	<b>Due no later than June 30, 2005</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>  H PETER DOBLE II 1330 FILER AVE E TWIN FALLS, ID 83301												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE DATE</b>	<b>1. Mailing Address - Correct in this box, if applicable</b>  TRINITY AUDIO, VISUAL AND PROPERTY 1330 FILER AVE E TWIN FALLS, ID 83301		3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Members. <table style="width: 100%; border: none;"> <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>President</td> <td>H. Peter Doble, II, MD</td> <td>PO Box 1864</td> <td>Twin Falls, ID</td> <td></td> <td>83300-1864</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>	President	H. Peter Doble, II, MD	PO Box 1864	Twin Falls, ID		83300-1864
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
President	H. Peter Doble, II, MD	PO Box 1864	Twin Falls, ID		83300-1864										
5. Organized Under the Laws of:  <div style="text-align: center;">IDAHO W 15568</div>		6. Signature  Date <u>4-19-05</u> Name <small>(Typed or Printed)</small> <u>H. Peter Doble, II, MD</u> Title <u>President</u>													