

No. **W 30891****Due no later than May 31, 2006****Annual Report Form**2. Registered Agent and Office **NO PO BOX**

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080**1. Mailing Address - Correct in this box, if applicable**CHARIZMA, LLC
418 COTTONWOOD DR
ST ANTHONY, ID 83445LORI MACKERT
418 COTTONWOOD DR
ST ANTHONY, ID 83445**NO FILING FEE IF
RECEIVED BY DUE DATE**3. New Registered Agent Signature

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

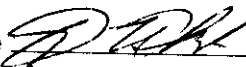
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
MEMBER	LORI MACKERT	418 COTTONWOOD	ST. ANTHONY	ID	83445
MEMBER	KIRK MACKERT	418 COTTONWOOD	ST. ANTHONY	ID	83445

5. Organized Under the Laws of:

IDAHO
W 30891

6.

Signature

Date 5-12-06

Name (Typed or Printed)

TROY THURGOODTitle ACCOUNTANT

Issued 03/01/2006

Do Not Tape or Staple

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