

No. W 50565

Due no later than May 31, 2009
Annual Report Form2. Registered Agent and Office **NO PO BOX**Return to:
SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

CUSTOM 32MM CABINETS & COUNTERTOPS,
413 E 3RD AVE STE B
POST FALLS, ID 83854JESSE JAMES
413 E 3RD AVE STE B
POST FALLS, ID 83854**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>
MANAGER	Jesse James	PO BOX 192	SPRIAT LAKE	ID	83869

5. Organized Under the Laws of:

IDAHO
W 50565

6.

Signature

Jesse James

Date

5-1-09

Name (Typed or Printed)

Jesse James

Title

MANAGER