NO FILING FEE IF	Due no later than September 30, 2006 Annual Report Form 1. Mailing Address - Correct in this box. if applicable FITNESS EXTENSION LLC	2. Registered Agent and Office NO PO BO MARK MESSER
	PO BOX 490 STAR, ID 83669 S: Enter Names and Addresses of Managers.	11345 W MEADOWBREEZE CT STAR, ID 83669 3. New Registered Agent Signature
<u>Office held</u> Name Maneiger Mark Me	Street or P.O. Addresses of Managers. SSA PO Box 490 Star	<u>State Zip</u> ID, 83669
5. Organized Under the Laws of:		
IDAHO W 43021	6. Signature	Date 9/12/etc
Issued 07/03/2006	Name Printed or Mark Messer Do Not Tape or Staple	Date 9/12/06