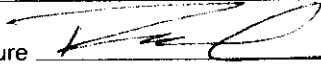


No. W 11825	Due no later than April 30, 2004 Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address. Correct in this box, if applicable.		TOM SUPNET 617 LINKERSHIM DR MERIDIAN, ID 83642												
	FLAMAR, LLC TOM SUPNET 617 LINKERSHIM DR MERIDIAN, ID 83342														
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td></td> <td>Member Tom Supnet</td> <td>617 Linkershim</td> <td>meridian</td> <td>Id</td> <td>83642</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>		Member Tom Supnet	617 Linkershim	meridian	Id	83642
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
	Member Tom Supnet	617 Linkershim	meridian	Id	83642										
5. Organized Under the Laws of: IDAHO W 11825		6. Signature  Date <u>4-19-04</u> Name (Typed or Printed) _____ Title _____													