No. W 90761		Due no later than Feb 28, 2011		2.	2. Registered Agent and Address (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		Annual Report Form 1. Mailing Address: Correct in this box if needed. DAMAGE LAB STUDIOS LLC 450 W. GROVE ST. #206 BOISE ID 83702			ADAM AMIEVA 2198 CONSTANTINE AVE BOISE ID 83704 3. New Registered Agent Signature:*			
		mes and Addresses of a	t least one Member or Manager. Street or PO Address		City	State	Country	Postal Code
MANAGER	JAMES R S	IMPSON	1800 N. COLE RD #I302		BOISE	ID	USA	83704
5. Organized Under the Laws of: ID W 90761		6. Annual Report must be signed.* Signature: Adam Amieva Name (type or print): Adam Amieva			Date: 01/26/2011 Title: Manager			
Processed 01/26/2011 * Electronically provided signatures are accepted as original signatures.								