| No. <b>W 16286</b>   |                                   | Due no later than Aug 31, 2005   |                                   | 2. Registered        | 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   |                                   |                      | MICHAEL A HALL 408 W IDAHO ST BOISE ID 83702 0000  3. New Registered Agent Signature:* |         |                |  |
|  |                                   | 1. Mailing Address: Correct in this box if needed.  QUALITY REAL ESTATE AND STOCK INVESTMENTS LLC MICHAEL A. HALL 1501 FEDERAL WAY SUITE 400 BOISE ID 83705 0000 |                                   |                      |  |         |                |  |
|  |                                   |  |                                   | 3. <u>New</u> Regist |  |         |                |  |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.                               |                                   |  |                                   |                      |  |         |                |  |
| Office Held Nar  | me                                |  | Street or PO Address              | City                 | State  | Country | Postal Code    |  |
|  | MATTHEW T MACKEY<br>MARK C MACKEY |  | 14277 MAYFIELD DR<br>942 E 8475 S | DRAPER<br>SANDY      | UT<br>UT   |         | 84020<br>84094 |  |
| 5. Organized Under the Laws of:  |                                   | 6. Annual Report must be signed.*  |                                   |                      |  |         |                |  |
| IDA HO<br>W 16286  |                                   | Signature: MATTHEW MACKEY Date: 08/31/2005   |                                   |                      |  |         |                |  |
|  |                                   | Name (type   | or print): MATTHEW MACKEY         |                      | Title: MANAGER   |         |                |  |
| Processed 08/31/2005 * Electronically provided signatures are accepted as original signatures.                             |                                   |  |                                   |                      |  |         |                |  |