

| | | |
|---|--|--|
| No. W 55459 | Due no later than Oct 31, 2007 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 RESTORER OF BROKEN WALLS L.L.C. PO BOX 44514 BOISE, ID 83704 |

4. Limited Liability Companies: Enter Names and Addresses of Managers.

| <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> |
|--------------------|-----------------|-------------------------------|-------------|--------------|------------|
| Owner | Chizette Parlor | PO BOX 44514 | Boise | Id. | 83711 |

| | |
|--|--|
| 5. Organized Under the Laws of: IDAHO W 55459 | 6. Signature <u>Chizette Parlor</u> Date <u>10/22/07</u> Name <small>(Typed or Printed)</small> <u>Chizette Parlor</u> Title <u>Owner</u> |
|--|--|