

|                                                                                                                                                        |                 |                                                                                                                                                         |             |                                                                |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------------------------------|---------|-------------|--|
| No. <b>C 134535</b>                                                                                                                                    |                 | <b>Due no later than Jun 30, 2007</b>                                                                                                                   |             | 2. Registered Agent and Address <b>(NO PO BOX)</b>             |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                 | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>ARTIST EASEL COMPANY<br>NORMAN KRAMER<br>1986 MONTICELLO DRIVE<br>IDAHO FALLS ID 83404 |             | NORMAN KRAMER<br>1986 MONTICELLO DRIVE<br>IDAHO FALLS ID 83404 |         |             |  |
|                                                                                                                                                        |                 |                                                                                                                                                         |             | 3. <u>New</u> Registered Agent Signature: *                    |         |             |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).                                      |                 |                                                                                                                                                         |             |                                                                |         |             |  |
| Office Held                                                                                                                                            | Name            | Street or PO Address                                                                                                                                    | City        | State                                                          | Country | Postal Code |  |
| PRESIDENT                                                                                                                                              | NORMAN A KRAMER | 1986 MONTICELLO DRIVE                                                                                                                                   | IDAHO FALLS | ID                                                             | USA     | 83404-6439  |  |
| SECRETARY                                                                                                                                              | GINGER I KRAMER | 1986 MONTICELLO DRIVE                                                                                                                                   | IDAHO FALLS | ID                                                             | USA     | 83404-6439  |  |
| DIRECTOR                                                                                                                                               | NORMAN A KRAMER | 1986 MONTICELLO DRIVE                                                                                                                                   | IDAHO FALLS | ID                                                             | USA     | 83404-6439  |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>C 134535</b>                                                                                          |                 | 6. Annual Report must be signed.*<br>Signature: Norman Kramer<br>Name (type or print): Norman Kramer                                                    |             |                                                                |         |             |  |
| Date: 05/29/2007<br>Title: President                                                                                                                   |                 |                                                                                                                                                         |             |                                                                |         |             |  |
| Processed 05/29/2007                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                               |             |                                                                |         |             |  |