W 22353	Due no later than January 31, 2008	2. Registered Agent and Office NO PO BOX
eturn to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE Limited Liability Compan	Annual Report Form 1. Mailing Address - Correct in this box. if applicable MBROS, LLC 1711 18TH ST LEWISTON, ID 83501 ies: Enter Names and Addresses of Managers. Street or P.O. Address City	HMICHAEL MALCOM 1711 18TH ST LEWISTON, ID 83501 Willram S. Malcom 3. New Registered Agent Signature Min. L. Malcom State State Zip Sisten ID 83501
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