

No. W 52849		Due no later than Jul 31, 2007 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. WHOLE ENCHIROLLI FOOD AND CATERING, LLC (THE) NORMA L GOMEZ 715 E 3RD ST RUPERT ID 83350		NORMA L GOMEZ 715 E 3RD ST RUPERT ID 83350			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	NORMA L GOMEZ	715 E 3RD ST	RUPERT	ID	USA	83350	
MANAGER	SHIRLEY A GOMEZ	3579 N 3000 E	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of: ID W 52849		6. Annual Report must be signed.* Signature: Norma L GOMEZ Name (type or print): Norma L GOMEZ					
		Date: 08/10/2007 Title: Manager					
Processed 08/10/2007		* Electronically provided signatures are accepted as original signatures.					