No. <b>W 73037</b>		Due no later than Apr 30, 2011		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		CHARITY WEEKS			
SECRETARY OF STATE	1. Mailing	1. Mailing Address: Correct in this box if needed.  ACME TECHNICAL SERVICES, LLC CHARITY S WEEKS 104 E FAIRVIEW AVE UNIT 265		205 11TH AVENUE NORTH NAMPA ID 83687			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	CHARITY S						
	MERIDIAN :	MERIDIAN ID 83642		3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter N	lames and Addres	sses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER CHARITY	WEEKS	209 REECE AVENUE	NYSSA	OR	USA	97913	
5. Organized Under the Laws of:	Organized Under the Laws of:  6. Annual Report must be signed.*						
ID	Signature:	Signature: Charity Weeks		Date: 05/02/2011			
W 73037	Name (type	e or print): Charity Weeks		Title: Owner			
Processed 05/02/2011	* Electronically	* Electronically provided signatures are accepted as original signatures.					