

No. <b>W 5911</b>	<b>Due no later than April 30, 2005</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address - Correct in this box, if applicable  MOSER MANUFACTURING, L.L.C. ROBERT PATRICK MOSER 519 E KING ST MERIDIAN, ID 83642		ROBERT PATRICK MOSER 519 E KING ST MERIDIAN, ID 83642  3. <u>New</u> Registered Agent Signature													
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th data-bbox="336 405 526 430"><u>Office held</u></th> <th data-bbox="526 405 832 430"><u>Name</u></th> <th data-bbox="832 405 1268 430"><u>Street or P.O. Address</u></th> <th data-bbox="1268 405 1530 430"><u>City</u></th> <th data-bbox="1530 405 1705 430"><u>State</u></th> <th data-bbox="1705 405 1906 430"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td data-bbox="336 430 526 493">Manager</td> <td data-bbox="526 430 832 493">Robert P. Moser</td> <td data-bbox="832 430 1268 493">519 E King St</td> <td data-bbox="1268 430 1530 493">Meridian</td> <td data-bbox="1530 430 1705 493">ID.</td> <td data-bbox="1705 430 1906 493">83642</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Manager	Robert P. Moser	519 E King St	Meridian	ID.	83642
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
Manager	Robert P. Moser	519 E King St	Meridian	ID.	83642											
5. Organized Under the Laws of:  IDAHO W 5911		6. Signature <u>Robert P. Moser</u> Date <u>3/7/05</u> Name <small>(Typed or Printed)</small> <u>Robert P. Moser</u> Title <u>Manager</u>														