No. W 55161	Due no later than October 31, 2007 Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box. if applicable is	CHRISANDRA MORGAN 920 12TH AVE S
	INTIMATE PLEASURES LLC 920 12TH AVE S NAMPA, ID 83651 NAMPA, ID 83651	
NO FILING FEE IF RECEIVED BY DUE DATE		3. <u>New</u> Registered Agent Signature
 Limited Liability Compani 	es: Enter Names and Addresses of Managers.	
Office held Name	Street or P.O. Address City	<u>State</u> <u>Zip</u>
manager Christiandra um	by 8005 E.Jacob Or. Na	mya Id. 8368)
nungger Jason Coll.	hs 8005 E Jacob Or. Na	mpa Id. 83687
manager michelle (Colling 8005 E. Jacob Dr. Nav	mpg Id, 83687
		Constitution of the second sec
5. Organized Under the Laws of: IDAHO W 55161	6.	Date 8/14/07
	Signature	71
	Name Private Call	th Title Manager