No. W 42419		Due no later than Aug 31, 2010		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. TEETH MAKERS LLC RENTAL JACQUELINE MOSGROVE 1119 N 4TH ST COEUR D'ALENE ID 83814		10 100 100 de la companya del la companya de la com	JACQUELINE NEFF			
				1119 N 4TH ST COEUR D'ALENE ID 83814 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.								
Office Held Nam	ne		Street or PO Address	City	State	Country	Postal Code	
	QUELINE BERLEE K	Mosgrove Æmpt	1119 N 4TH ST 1119 N 4TH ST	COEUR D'ALENE COEUR D'ALENE	ID ID	USA USA	83814 83814	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Jacqueline Mosgrove Date: 06/18/2010					(
W 42419		Name (type or print): Jacqueline Mosgrove			Title: Member			
Processed 06/18/2010	* Electronically provided signatures are accepted as original signatures.							