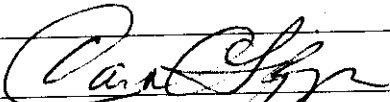


No. W 7453	Due no later than Dec 31, 2002 Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable		CAROL FIPPS 393 W STATE ST STE C EAGLE, ID 83616												
	STUDIO C, LLC 500 S FITNESS PLACE EAGLE, ID 83616														
3. <u>New</u> Registered Agent Signature															
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Director</td> <td>Carol Fipps</td> <td>500 S. Fitness Place</td> <td>Eagle</td> <td>Idaho</td> <td>83616</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>	Director	Carol Fipps	500 S. Fitness Place	Eagle	Idaho	83616
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
Director	Carol Fipps	500 S. Fitness Place	Eagle	Idaho	83616										
5. Organized Under the Laws of: IDAHO W 7453		6. Signature  Date <u>11/11/02</u> Name (Typed or Printed) <u>CAROL FIPPS</u> Title <u>DIRECTOR</u>													