

No. W 17755	Due no later than Jan 31, 2005 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	1. Mailing Address - Correct in this box, if applicable HEALTH-FIT DESIGNS, LLC 3828 E FLAMINGO AVE NAMPA, ID 83687	MARY M VELOZ 3828 E FLAMINGO AVE NAMPA, ID 83687
NO FILING FEE IF RECEIVED BY DUE DATE		3. <u>New</u> Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

Office held	Name	Street or P.O. Address	City	State	Zip
MEMBER	MARY VELOZ M.	1314 CAMELOT DR.	Nampa	ID	83651
MEMBER	CYNTHIA REYNOLDS	324 ORCHARD HEIGHTS	Nampa	ID	83651
MANAGER	CHRIS VELOZ	8152 E. JACOB DR.	Nampa	ID	83687

5. Organized Under the Laws of: IDAHO W 17755	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Signature <u>Christopher E. Veloz</u></td> <td style="width: 40%;">Date <u>2/14/2005</u></td> </tr> <tr> <td>Name (Typed or Printed) <u>CHRISTOPHER E. VELOZ</u></td> <td>Title <u>MANAGER</u></td> </tr> </table>	Signature <u>Christopher E. Veloz</u>	Date <u>2/14/2005</u>	Name (Typed or Printed) <u>CHRISTOPHER E. VELOZ</u>	Title <u>MANAGER</u>
Signature <u>Christopher E. Veloz</u>	Date <u>2/14/2005</u>				
Name (Typed or Printed) <u>CHRISTOPHER E. VELOZ</u>	Title <u>MANAGER</u>				