No. W 49336	Due no later than April 30, 2008 Annual Report Form I. Mailing Address - Correct in this box, if applicable MAB, LLC 9488 FAIRVIEW AVE. BOISE, ID 83704		2. Registered Agent and Office NO PO BOX ENTITY SERVICES INC 1101 W RIVER ST #340 BOISE, ID 83702	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720				
NO FILING FEE IF		3.	New Registered Agent Signature	
RECEIVED BY DUE DATE 4. I imited Liability Compan	ies: Enter Names and Addresses of Mana	igers.		
Office held Name Resident Diana Ravela	Street or P.O. Address PYSS Fairvian Are	<u>City</u> Bolse	State Zip \$370P	·.
(Camiri				÷
5. Organized Under the Laws of: IDAHO W 49336	Signature Light Bar Name (Typed or Dight Rate	uh.	Date 4108 Title Boulder	
Issued 02/01/2008	Do Not Tape or Staple		200804007652	