

No. W 68905	Due no later than November 30, 2008 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 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address - Correct in this box, if applicable BISTRO 2 FIFTEEN, LLC. 28565 OLD FORT BOISE RD PARMA, ID 83660

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Manager	Kimberly S. Kramer	28565 Old Fort Boise Rd	Parma	Id	83660
Manager	Timothy S. Kramer	"	"	"	"

5. Organized Under the Laws of: IDAHO W 68905	6. Signature <u>Kimberly S. Kramer</u> Date <u>11/30/08</u> Name (Typed or Printed) <u>Kimberly S. Kramer</u> Title <u>Manager</u>
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