A-A	Due no later than July 31, 2008	2. Registered Agent and Office NO PO BO
Return to: SECRETARY OF STATE	Annual Report Form 1. Mailing Address - Correct in this box: if applicable	LUKINS & ANNIS, PS
450 NORTH FOURTH STREET	WHIR HOLDING CO. LLO	250 NORTHWEST BLVD STE 102
PO BOX 83720	MALERING HIJ REMKES WOLF CLAYL	COEUR D'ALENE, ID 83814
50/3E, 1D 83720-0080	CAMPBELL, CA 95008	
TO FILING FEE IF	JSA	3. New Registered Agent Signature
RECEIVED BY DUE DATE	<u> </u>	
Limited Liability Companies	Enter Names and Addresses of Members.	
Office held Name		
	Street or P.O. Address Cit	Y State Zip
MEHBER WOLFLANG	REHKES P.O. BOX 182	
	\sim	amprell of 90009.
		1825
WOLFGANG REMK	es /hpp/op/	/ 4 ~ 0
PO BOX 1825 CAMPBELL CA 950	77813/6-0660	
GAMIL DELLE CA 930	09-1625	
	1 1	
Organized Under the Laws of:	T6.	
IDAHO		1) 2/19/20
W 31953	Signature	Date _ 3 19 &
	Name Printed WOLFLAM VEE	MUS TO Member
Issued 05/02/2008	Trumo mass	Title / lubes
100000 00/02/2000	Do Not Tape or Staple	200807005989