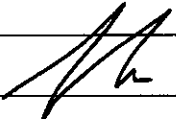


No. J 494	Due no later than March 31, 2006 Annual Report Form		2. Registered Agent and Office NO PO BOX																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable		JIM COMBE 4293 E FRANKLIN RD NAMPA, ID 83687																			
	ELITE RIFLE WORKS LLP 4293 EAST FRANKLIN RD NAMPA, ID 83687		3. <u>New</u> Registered Agent Signature																			
4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.																						
<table border="1"> <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>partner</td> <td>Jim Combe</td> <td>4293 E. Franklin Rd</td> <td>Nampa</td> <td>Idaho</td> <td>83687</td> </tr> <tr> <td>partner</td> <td>Ray Combe</td> <td>3275 Whitman Dr.</td> <td>Boise</td> <td>Id.</td> <td>83716</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>	partner	Jim Combe	4293 E. Franklin Rd	Nampa	Idaho	83687	partner	Ray Combe	3275 Whitman Dr.	Boise	Id.	83716
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5. Organized Under the Laws of: IDAHO J 494		6. Signature  Date <u>1/18/06</u> Name (Typed or Printed) <u>Jim Combe</u> Title <u>Partner</u>																				

Issued 01/04/2006

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