

|                                                                                                                                                        |                 |                                                                                                                                                                                |        |                                                         |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|---------------------------------------------------------|---------|-------------|--|
| No. <b>W 41184</b>                                                                                                                                     |                 | <b>Due no later than Jul 31, 2007</b>                                                                                                                                          |        | 2. Registered Agent and Address <b>(NO PO BOX)</b>      |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                 | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>SEVEN B.S.'S, LLC<br>MARTHELLA SMITH<br>2653 FAIRMONT AVE<br>BURLEY ID 83318 |        | MARTHELLA SMITH<br>2653 FAIRMONT AVE<br>BURLEY ID 83318 |         |             |  |
|                                                                                                                                                        |                 |                                                                                                                                                                                |        | 3. <u>New</u> Registered Agent Signature:*              |         |             |  |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.                                                           |                 |                                                                                                                                                                                |        |                                                         |         |             |  |
| Office Held                                                                                                                                            | Name            | Street or PO Address                                                                                                                                                           | City   | State                                                   | Country | Postal Code |  |
| MANAGER                                                                                                                                                | MARTHELLA SMITH | 2653 FAIRMONT AVE                                                                                                                                                              | BURLEY | ID                                                      | USA     | 83318       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 41184</b>                                                                                           |                 | 6. Annual Report must be signed.*<br>Signature: Marthella Smith<br>Name (type or print): Marthella Smith<br>Date: 05/23/2007<br>Title: Manager                                 |        |                                                         |         |             |  |
| Processed 05/23/2007                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                                      |        |                                                         |         |             |  |