No. C 115713		Due no later than Jul 31, 2009			2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. TIA (USA), LTD. ROBERT M KAPLAN PO BOX 2600 SUN VALLEY ID 83353		ROBERT KORB 128 SADDLE RD KETCHUM ID 83340 3. New Registered Agent Signature:*					
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		ness Addresse	s of President, Secretary, and Directors. Tr	easurer (optional).				
Office Held	Name		Street or PO Address		City	State	Country	Postal Code	
DIRECTOR	ROBERT KA	APLAN	PO BOX 2600		SUN VALLEY	ID	USA	83353	
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID C 115713		Signature: Robert M. Kaplan Date: 07/29/2009							
		Name (ty	Name (type or print): Robert M. Kaplan Title: Pres. & Director						
Processed 07/29/2009	rocessed 07/29/2009 * Electronically provided signatures are accepted as original signatures.								