Datum 1	Due no later than July 31, 2004	
Return to:	Annual Report Form	2. Registered Agent and Office NO PO BOX
SECRETARY OF STATE 700 WEST JEFFERSON	1. Mailing Address - Correct in this box if applicable	CHAD W SHEPPEARD
PO BOX 83720	ACCENT DESIGN LLC	531 LOST BASIN CT
BOISE, ID 83720-0080	531 LOST BASIN CT NAMPA, ID 83686	NAMPA, ID 83686
NO FILING FEE IF		3 New Pogistered A
RECEIVED BY DUE DATE		3. New Registered Agent Signature
Limited Liability Compa	anies: Enter Names and Addresses of Members.	
Office held Name	and Addresses of Members.	
ACCENT DESIGN, L	SUBBLIOF PC) Addrosp	V State
	LC. 3271 N. MILWAUKEE BOI	5E ID 8370Y
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Organized Under the Laws of		
Organized Under the Laws of:	6.	
IDAHO	6. Signature Chad Suma	
	6. Signature <u>Chad Stepped</u>	
IDAHO W 20158	6. Signature <u>CHAD SHEPPEA</u> Name Printing	
IDAHO	6. Signature <u>CHAD</u> SHEPPEA Name Printing <u>CHAD</u> SHEPPEA	