

|                                                                                                                                                        |               |                                                                                   |        |                                                             |                  |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------------------------------------------------------------|--------|-------------------------------------------------------------|------------------|-------------|--|
| No. <b>W 57119</b>                                                                                                                                     |               | <b>Due no later than Dec 31, 2010</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>                                                         |        | ALAN FRANSEN<br>1120 GREEN WILLOW DRIVE<br>REXBURG ID 83440 |                  |             |  |
|                                                                                                                                                        |               | <b>1. Mailing Address: Correct in this box if needed.</b>                         |        | 3. <u>New</u> Registered Agent Signature:*                  |                  |             |  |
|                                                                                                                                                        |               | AHR ENTERPRISES, LLC<br>ALAN FRANSEN<br>1120 GREEN WILLOW DR.<br>REXBURG ID 83440 |        |                                                             |                  |             |  |
| 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 |  |
| MEMBER                                                                                                                                                 | ALAN FRANSEN  | 3296 E 1200 N                                                                     | ASHTON | ID                                                          | USA              | 83420       |  |
| MEMBER                                                                                                                                                 | HEIDI FRANSEN | 3296 E 1200 N                                                                     | ASHTON | ID                                                          | USA              | 83420       |  |
| 5. Organized Under the Laws of:                                                                                                                        |               | 6. Annual Report must be signed.*                                                 |        |                                                             |                  |             |  |
| <b>ID<br/>W 57119</b>                                                                                                                                  |               | Signature: Alan Fransen                                                           |        |                                                             | Date: 10/28/2010 |             |  |
|                                                                                                                                                        |               | Name (type or print): Alan Fransen                                                |        |                                                             | Title: Officer   |             |  |
| Processed 10/28/2010                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.         |        |                                                             |                  |             |  |