No. <b>W 10796</b>	Due no later than Jan 31, 2008	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	ROBERT PHILLIPS 1951 S SATURN WAY STE 100 BOISE ID 83709			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.  HS COMPUSA CENTER LLC				
	ROBERT L PHILLIPS 855 BROAD STREET				
NO FEE TAKE FEE TE	SUITE 300 BOISE ID 83702-7153	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	BOISE ID 63/02-/133				
4. Limited Liability Companies: Enter Na	mes and Addresses of at least one Member or Manager.				
Office Held Name	Street or PO Address	City	State	Country	Postal Code
MANAGER HAWKINS SI	BOISE	ID	USA	83702-7153	
5. Organized Under the Laws of:	6. Annual Report must be signed.*				
ID	Signature: Kathy Fife	Date: 01/16/2008			
W 10796	Name (type or print): Kathy Fife	Title: Empl Auth to Renew			
Processed 01/16/2008	* Electronically provided signatures are accepted as original signatures.				