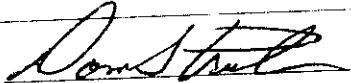


No. W 19833	Due no later than July 31, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable		MOLLY STRUCKMAN 5220 N LINDER RD MERIDIAN, ID 83642 5108													
	S.B. & H., LLC 5220 N LINDER RD MERIDIAN, ID 83642 5108		3. <u>New</u> Registered Agent Signature													
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="0" data-bbox="307 398 1873 569"><thead><tr><th><u>Office held</u></th><th><u>Name</u></th><th><u>Street or P.O. Address</u></th><th><u>City</u></th><th><u>State</u></th><th><u>Zip</u></th></tr></thead><tbody><tr><td></td><td>MANAGER DONN STRUCKMAN</td><td>5220 N. LINDER</td><td>MERIDIAN</td><td>ID.</td><td>83642</td></tr></tbody></table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>		MANAGER DONN STRUCKMAN	5220 N. LINDER	MERIDIAN	ID.	83642
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
	MANAGER DONN STRUCKMAN	5220 N. LINDER	MERIDIAN	ID.	83642											
5. Organized Under the Laws of: IDAHO W 19833		6. Signature  Date <u>5-6-05</u> Name <small>(Typed or Printed)</small> <u>DONN STRUCKMAN</u> Title <u>MANAGER</u>														

Issued 05/02/2005

Do Not Tape or Staple

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