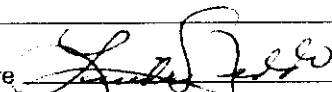
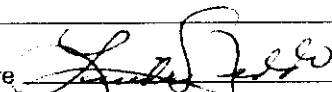
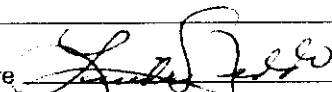


<b>No. C 140330</b>	<b>Due no later than August 31, 2003</b> <b>Annual Report Form</b>	2. Registered Agent and Office <b>NO PO BOX</b> LINDA M NEDDO <del>329 S WOODRUFF AVE</del> 1916 Channing Way IDAHO FALLS, ID 83401
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address (Correct in this box, if applicable) OPTICAL ILLUSIONS, INC.  <del>329 S WOODRUFF</del> P.O. Box 1029  IDAHO FALLS, ID 83401	3. <u>New</u> Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.
 

	<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRES:		LINDA NEDDO	2251 WAHLQUIST AVE.	IDAHO FALLS,	ID	83401
SEC:		DENNIS NEDDO	2251 WAHLQUIST AVE.	IDAHO FALLS,	ID	83401
DIR:		LINDA NEDDO	2251 WAHLQUIST AVE.	IDAHO FALLS,	ID	83401
		DENNIS NEDDO	2251 WAHLQUIST AVE.	IDAHO FALLS,	ID	83401

5. Organized Under the Laws of:  IDAHO C 140330	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Signature </td> <td style="width: 40%;">Date 08-</td> </tr> <tr> <td>Name (Typed or Printed) Linda Neddo</td> <td>Title owner</td> </tr> </table>	Signature 	Date 08-	Name (Typed or Printed) Linda Neddo	Title owner
Signature 	Date 08-				
Name (Typed or Printed) Linda Neddo	Title owner				