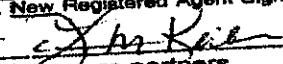
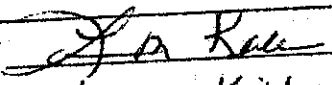


| <b>Due no later than December 31, 2007</b><br><b>Annual Report Form</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                              | <b>2. Registered Agent and Office NO PO BOX</b>                                                                                                                |                                                                                                                                                                                                                        |       |       |     |         |               |              |       |    |       |         |                |              |   |   |   |         |                |   |   |   |   |  |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------|-----|---------|---------------|--------------|-------|----|-------|---------|----------------|--------------|---|---|---|---------|----------------|---|---|---|---|--|--|--|
| <b>No. J 1080</b><br><br><b>Return to:</b><br>SECRETARY OF STATE<br>450 NORTH FOURTH STREET<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>1. Mailing Address - Correct in this box - if applicable</b><br><br>RELIANT ENTERPRISES LLP<br>110 MAIN ST STE 1-A<br>SANDPOINT, ID 83864 |                                                                                                                                                                | Does not apply<br>Lianne Keibler<br>110 Main St. Ste 1-A<br>Sandpoint, ID 83864<br><br><b>3. New Registered Agent Signature</b><br> |       |       |     |         |               |              |       |    |       |         |                |              |   |   |   |         |                |   |   |   |   |  |  |  |
| <b>4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                              |                                                                                                                                                                |                                                                                                                                                                                                                        |       |       |     |         |               |              |       |    |       |         |                |              |   |   |   |         |                |   |   |   |   |  |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Office held</th> <th style="width: 25%;">Name</th> <th style="width: 30%;">Street or P.O. Address</th> <th style="width: 15%;">City</th> <th style="width: 10%;">State</th> <th style="width: 5%;">Zip</th> </tr> </thead> <tbody> <tr> <td>Partner</td> <td>Bryan Keibler</td> <td>110 Main St.</td> <td>Sndpt</td> <td>ID</td> <td>83864</td> </tr> <tr> <td>Partner</td> <td>Lianne Keibler</td> <td>110 Main St.</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Partner</td> <td>Charlene Moore</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table> | Office held                                                                                                                                  | Name                                                                                                                                                           | Street or P.O. Address                                                                                                                                                                                                 | City  | State | Zip | Partner | Bryan Keibler | 110 Main St. | Sndpt | ID | 83864 | Partner | Lianne Keibler | 110 Main St. | " | " | " | Partner | Charlene Moore | " | " | " | " |  |  |  |
| Office held                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Name                                                                                                                                         | Street or P.O. Address                                                                                                                                         | City                                                                                                                                                                                                                   | State | Zip   |     |         |               |              |       |    |       |         |                |              |   |   |   |         |                |   |   |   |   |  |  |  |
| Partner                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Bryan Keibler                                                                                                                                | 110 Main St.                                                                                                                                                   | Sndpt                                                                                                                                                                                                                  | ID    | 83864 |     |         |               |              |       |    |       |         |                |              |   |   |   |         |                |   |   |   |   |  |  |  |
| Partner                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Lianne Keibler                                                                                                                               | 110 Main St.                                                                                                                                                   | "                                                                                                                                                                                                                      | "     | "     |     |         |               |              |       |    |       |         |                |              |   |   |   |         |                |   |   |   |   |  |  |  |
| Partner                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Charlene Moore                                                                                                                               | "                                                                                                                                                              | "                                                                                                                                                                                                                      | "     | "     |     |         |               |              |       |    |       |         |                |              |   |   |   |         |                |   |   |   |   |  |  |  |
| <b>5. Organized Under the Laws of:</b><br>IDAHO<br>J 1080                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                              | <b>6. Signature</b> <br><b>Name</b> (Typed or Printed) <u>Lianne Keibler</u> |                                                                                                                                                                                                                        |       |       |     |         |               |              |       |    |       |         |                |              |   |   |   |         |                |   |   |   |   |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                              | <b>Date</b> <u>10/24/07</u><br><b>Title</b> <u>Partner</u><br>200712005636                                                                                     |                                                                                                                                                                                                                        |       |       |     |         |               |              |       |    |       |         |                |              |   |   |   |         |                |   |   |   |   |  |  |  |

Issued 10/01/2007

**Do Not Tape or Staple**  
Fold, seal and mail this portion.

Detach at this perforation and discard this lower portion.