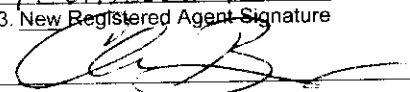



No. W 26218	Due no later than October 31, 2004 Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable CONCRETE CANVAS, LLC P O BOX 184 POCATELLO, ID 83204		LURLINE BERRY 1098 ROCKY POINT RD POCATELLO, ID 83204 CHRIS BERRY 369 VISTA DR POCATELLO, ID 83201												
NO FILING FEE IF RECEIVED BY DUE DATE			3. New Registered Agent Signature 												
4. Limited Liability Companies: Enter Names and Addresses of Members.															
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;"><u>Office held</u></th> <th style="text-align: left; width: 25%;"><u>Name</u></th> <th style="text-align: left; width: 30%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 15%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MANAGER</td> <td>CHRIS BERRY</td> <td>369 VISTA DR</td> <td>POCATELLO</td> <td>ID</td> <td>83201</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	CHRIS BERRY	369 VISTA DR	POCATELLO	ID	83201
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
MANAGER	CHRIS BERRY	369 VISTA DR	POCATELLO	ID	83201										
5. Organized Under the Laws of: IDAHO W 26218		6. Signature  Date <u>10-18-04</u> Name (Typed or Printed) <u>CHRIS BERRY</u> Title <u>MANAGER</u>													