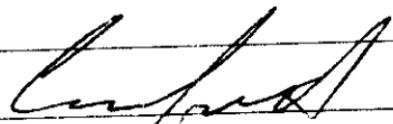


No. W 20078	Due no later than July 31, 2005 Annual Report Form	2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address - Correct in this box, if applicable SURE GLOW, LLC 966 NORTHGATE MILE IDAHO FALLS, ID 83401	CAMERON W SMITH 966 NORTHGATE MILE IDAHO FALLS, ID 83401											
3. <u>New</u> Registered Agent Signature														
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MANAGER</td> <td>Cameron Smith</td> <td>966 Northgate Mile</td> <td>Idaho Falls</td> <td>ID</td> <td>83401</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	Cameron Smith	966 Northgate Mile	Idaho Falls	ID	83401
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>									
MANAGER	Cameron Smith	966 Northgate Mile	Idaho Falls	ID	83401									
5. Organized Under the Laws of: IDAHO W 20078	6. Signature  Date <u>5-16-05</u> Name <small>(Typed or Printed)</small> <u>CAMERON SMITH</u> Title <u>OWNER</u>													