

No. W 13535	Due no later than November 30, 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address. Correct in this box, if applicable BARBARA JULIAN INSIDE PASSAGES MASSAGE CENTER, L.L. PO BOX 3085 HAILEY, ID 83333		BARBARA JULIAN 1927 BROADWOOD BRIARWOOD HAILEY, ID 83333 DR.																		
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>manager/ owner</td> <td>Barbara Julian</td> <td>P.O. Box 3085</td> <td>Hailey</td> <td>ID</td> <td>83333</td> </tr> <tr> <td></td> <td></td> <td>Inside Passages Massage Center, LLC</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	manager/ owner	Barbara Julian	P.O. Box 3085	Hailey	ID	83333			Inside Passages Massage Center, LLC				3. New Registered Agent Signature
Office held	Name	Street or P.O. Address	City	State	Zip																
manager/ owner	Barbara Julian	P.O. Box 3085	Hailey	ID	83333																
		Inside Passages Massage Center, LLC																			
5. Organized Under the Laws of: IDAHO W 13535	6. Signature <u>Barbara Julian</u> Date <u>9-10-04</u> Name (Typed or Printed) <u>BARBARA JULIAN</u> Title <u>manager/owner</u>																				

Issued 09/01/2004

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