

No. J 684 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than November 30, 2004 Annual Report Form 1. Mailing Address - Correct in this box, if applicable BROKEN MOUTH LLP 811 W 5TH ST FILER, ID 83328	2. Registered Agent and Office NO PO BOX T J PRESCOTT 811 W 5TH ST FILER, ID 83328 3. <u>New</u> Registered Agent Signature
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4. Limited Liability Partnerships: No further information is required.

Office held	Name	Street or P.O. Address	City	State	Zip
	T.J. Prescott	811 W 5TH ST	Filer	ID	83328

5. Organized Under the Laws of: IDAHO J 684	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"> Signature  </td> <td style="width: 50%;"> Date <u>9/10/04</u> </td> </tr> <tr> <td> Name (Typed or Printed) <u>T.J. Prescott</u> </td> <td> Title <u>LLP owner</u> </td> </tr> </table>	Signature 	Date <u>9/10/04</u>	Name (Typed or Printed) <u>T.J. Prescott</u>	Title <u>LLP owner</u>
Signature 	Date <u>9/10/04</u>				
Name (Typed or Printed) <u>T.J. Prescott</u>	Title <u>LLP owner</u>				

Do Not Tape or Staple

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