| No. W 33359 | | Due no later than Sep 30, 2005 | | 2. Registered Agent and Address (NO PO BOX) | | | | |
|--|------------------|---|------------------------------------|---|-------------------|-------|---------|-------------|
| Return to: | | Annual Report Form | | | JAMES A KOZAK | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. CYCLEMETRIX LLC JAMES A KOZAK 7656 BAILLIE ST DALTON GARDENS ID 83815 0000 3. New Registered Agent Signature:* | | | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Limited Liability Companies: 8 | Enter Nai | mes and Addresses o | of at least one Member or Manager. | | | | | |
| Office Held Nam | ie | | Street or PO Address | | City | State | Country | Postal Code |
| MANAGER JAM | JAMES A KOZAK | | 7656 BAILLIE ST | | DALTON GARDENS | ID | | 83815 |
| MANAGER KAT | KATHLEEN L KOZAK | | 7656 BAILLIE ST | | DALTON GARDENS | ID | | 83815 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| IDA HO W 33359 | | Signature: James A. Kozak | | | Date: 09/12/2005 | | | |
| | | Name (type or print): James A. Kozak | | | Title: Officer | | | |
| Processed 09/12/2005 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |