No. W 51600	Due no later than Jun 30, 2007 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 BEHREND PLUMBING AND HEATING LLC ~~89 S ADAMS AVE~~ 435 Fillmore ~~BLACKFOOT, ID 83221~~ Twin Falls ID 83301	JEFFREY LEO BEHREND ~~89 S ADAMS AVE~~ 435 Fillmore ~~BLACKFOOT, ID 83221~~ Twin Falls ID 83301 3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

Office held	Name	Street or P.O. Address	City	State	Zip
owner	Jeff Behrend	435 Fillmore	Twin Falls	ID	83301

5. Organized Under the Laws of:	6.
IDAHO W 51600	Signature Jeff Behrend Date 7/9/07 Name (Type or Print) Jeff Behrend Title 7/9/07

Issued 07/09/2007 by SL1 **Do Not Tape or Staple** 200706007721

C Fold, seal and mail this portion. C

Detach at this perforation and discard this lower portion.

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

BLOCK 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address must be inside Block 1.

BLOCK 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box**

BLOCK 3: Only a new registered agent must sign in Block 2.

BLOCK 4: Enter names and business addresses of president, secretary, and directors (for corporations only) or managers/members (for LLC's only). **Note: Putting "same as last year" or "same as above" or leaving the block blank will not be accepted. Changes here will not affect the address in Block 1. Be sure to include office held for each name listed.**

BLOCK 5: May not be altered through the use of this form.

BLOCK 6: The annual report must be signed by a person authorized to represent the corporation/LLC. Print or type the name and title of the signer below the signature.

The image of this form will be available on the internet once it is filed. DO NOT enter Social Security Numbers.

If the (corporation/Limited Liability Company) is no longer doing business in Idaho, you may file the appropriate form and fee. Forms are available on our website at www.idsos.state.id.us. However, if no timely annual report is filed, administrative action will be taken, at no cost to the (corporation/Limited Liability Company), to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

POSTMARK DATES WILL NOT BE ACCEPTED

REV. 01/03