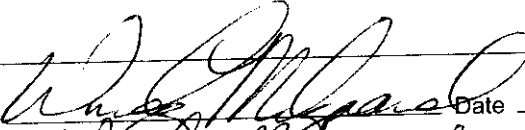


No. <b>W 14843</b>	<b>Due no later than March 31, 2004</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address - Correct in this box, if applicable		GREGORY J EHARDT 2677 EAST 17TH ST STE 400																		
	PRO-LINE ENTERPRISES, LLC  8189 N 5TH E  IDAHO FALLS, ID 83401		IDAHO FALLS, ID 83406																		
3. <u>New</u> Registered Agent Signature																					
4. Limited Liability Companies: Enter Names and Addresses of Managers.  <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>Wendy Melgaard</td> <td>8189 N 5th E</td> <td>Idaho Falls</td> <td>Id</td> <td>83401</td> </tr> <tr> <td>Manager</td> <td>Jeff Melgaard</td> <td>8189 N 5th E</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	Wendy Melgaard	8189 N 5th E	Idaho Falls	Id	83401	Manager	Jeff Melgaard	8189 N 5th E	Idaho Falls	Id	83401
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5. Organized Under the Laws of:  IDAHO W 14843		6. Signature  Date <u>3/5/04</u> Name (Typed or Printed) <u>Wendy Melgaard</u> Title <u>Manager</u>																			