

<b>No. W 74099</b>		<b>Due no later than May 31, 2009</b>		<b>2. Registered Agent and Office NO PO BOX</b>													
<b>Return to:</b> SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>		SOT CHIMONAS 276 S MOON BEAM WAY EAGLE, ID 83616													
		1. Mailing Address - Correct in this box, if applicable  CHIMONAS ENTERPRISES LLC 276 S MOON BEAM WAY EAGLE, ID 83616															
				3. <u>New</u> Registered Agent Signature													
4. Limited Liability Companies: Enter Names and Addresses of Managers.																	
<table border="1"><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>President</td><td>Sot Chimonas</td><td>276 S. Moon Beam Way</td><td>Eagle</td><td>IA</td><td>83616</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>	President	Sot Chimonas	276 S. Moon Beam Way	Eagle	IA	83616
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>												
President	Sot Chimonas	276 S. Moon Beam Way	Eagle	IA	83616												
5. Organized Under the Laws of:  IDAHO W 74099		6. <table border="1"><tr><td>Signature</td><td><u>Sot Chimonas</u></td><td>Date</td><td><u>5-31-09</u></td></tr><tr><td>Name <small>(Typed or Printed)</small></td><td><u>Sot Chimonas</u></td><td>Title</td><td><u>President.</u></td></tr></table>				Signature	<u>Sot Chimonas</u>	Date	<u>5-31-09</u>	Name <small>(Typed or Printed)</small>	<u>Sot Chimonas</u>	Title	<u>President.</u>				
Signature	<u>Sot Chimonas</u>	Date	<u>5-31-09</u>														
Name <small>(Typed or Printed)</small>	<u>Sot Chimonas</u>	Title	<u>President.</u>														