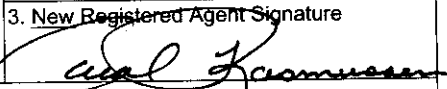
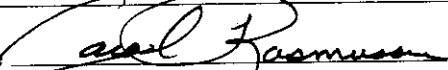


No. W 14695	Due no later than Mar 31, 2002 Annual Report Form		2. Registered Agent and Office NO PO BOX																								
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable PERFORMANCE SPORTS, LLC. PO BOX 695 ASHTON, ID 83420		MIKE RASMUSSEN <i>Carol Rasmussen</i> 64 NORTH HIGHWAY 20 ASHTON, ID 83420 3. New Registered Agent Signature 																								
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>MANAGER</td> <td>MIKE RASMUSSEN</td> <td>PO BOX 695</td> <td>Ashton</td> <td>Id.</td> <td>83420</td> </tr> <tr> <td></td> <td>MANAGER</td> <td>Carol Rasmussen</td> <td>PO BOX 695</td> <td>Ashton</td> <td>Id. 83420</td> </tr> <tr> <td></td> <td>Member</td> <td>MIKE Rasmussen</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	MANAGER	MIKE RASMUSSEN	PO BOX 695	Ashton	Id.	83420		MANAGER	Carol Rasmussen	PO BOX 695	Ashton	Id. 83420		Member	MIKE Rasmussen			
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5. Organized Under the Laws of: IDAHO W 14695	6. Signature  Date <u>1-14-01</u> Name (Typed or Printed) <u>Carol Rasmussen</u> Title <u>manager CEO</u>																										