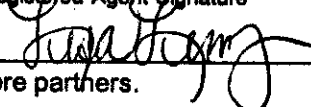
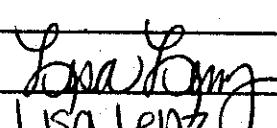


No. J 1194 Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than September 30, 2008 Annual Report Form 1. Mailing Address - Correct in this box, if applicable LENZ CUSTOM CONCRETE, LLP 18319 W USTICK RD CALDWELL, ID 83607	2. Registered Agent and Office NO PO BOX Need to Appoint LISA LENZ 18319 W. Ustick Rd. Caldwell, Id. 83607 3. New Registered Agent Signature 																		
4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.																				
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 10%;"><u>Office held</u></th> <th style="text-align: left; width: 15%;"><u>Name</u></th> <th style="text-align: left; width: 30%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Owner</td> <td>Lisa Lenz</td> <td>18319 W. Ustick Rd.</td> <td>Caldwell</td> <td>Id.</td> <td>83607</td> </tr> <tr> <td>Owner</td> <td>Brian Lenz</td> <td>18319 W. Ustick Rd.</td> <td>Caldwell</td> <td>Id.</td> <td>83607</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>	Owner	Lisa Lenz	18319 W. Ustick Rd.	Caldwell	Id.	83607	Owner	Brian Lenz	18319 W. Ustick Rd.	Caldwell	Id.	83607
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>															
Owner	Lisa Lenz	18319 W. Ustick Rd.	Caldwell	Id.	83607															
Owner	Brian Lenz	18319 W. Ustick Rd.	Caldwell	Id.	83607															
5. Organized Under the Laws of: IDAHO J 1194	6. Signature  Date <u>July 14, 2008</u> Name (Typed or Printed) <u>Lisa Lenz</u> Title _____																			

Issued 07/01/2008

Do Not Tape or Staple

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