

<p>No. <b>W 23090</b></p> <p>Return to:  <b>SECRETARY OF STATE</b>  <b>450 NORTH FOURTH STREET</b>  <b>PO BOX 83720</b>  <b>BOISE, ID 83720-0080</b></p> <p><b>NO FILING FEE IF RECEIVED BY DUE DATE</b></p>		<p><b>Due no later than March 31, 2008</b></p> <p><b>Annual Report Form</b></p> <p>1. Mailing Address - Correct in this box, if applicable</p> <p>7M GROUP, LLC  10988 JOPLIN RD  BOISE, ID 83714</p> <p><b>3295 N CROFT WAY</b>  <b>Eagle FD 83616</b></p>		<p>2. Registered Agent and Office NO PO BOX</p> <p><b>M R MATZDORFF</b>  10988 JOPLIN RD <b>3295 N CROFT WAY</b>  BOISE, ID 83714</p> <p><b>Eagle FD 83616</b></p>																			
<p>4. Limited Liability Companies: Enter Names and Addresses of Managers.</p> <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>MBR</td> <td>MICHAEL MATZDORFF</td> <td>3295 N CROFT WAY</td> <td>Eagle</td> <td>FD</td> <td>83616</td> </tr> <tr> <td>MBR</td> <td>MELINOR MATZDORFF</td> <td></td> <td></td> <td></td> <td></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>	MBR	MICHAEL MATZDORFF	3295 N CROFT WAY	Eagle	FD	83616	MBR	MELINOR MATZDORFF				
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<p>5. Organized Under the Laws of:</p> <p><b>IDAHO</b>  <b>W 23090</b></p>		<p>6. Signature <u><i>Melinda</i></u> Date <u><i>1-9-08</i></u></p> <p>Name <small>(Typed or Printed)</small> <u><i>MATZDORFF</i></u> Title <u><i>MBR</i></u></p>																					
<p>200803006996</p>																							