

No. W 29030	Due no later than March 31, 2005 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 JUSTUS CARTRIDGE REFILLS, LLC 9650 W LOST HORSE LANE KUNA, ID 83634		MATTHEW B RISSELL 9650 W LOST HORSE LANE KUNA, ID 83634 3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Members. <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/owner</td> <td>Matthew B Rissell</td> <td>9650 W Lost Horse Ln</td> <td>Kuna</td> <td>ID</td> <td>83634</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/owner	Matthew B Rissell	9650 W Lost Horse Ln	Kuna	ID	83634
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
President/owner	Matthew B Rissell	9650 W Lost Horse Ln	Kuna	ID	83634										
5. Organized Under the Laws of: IDAHO W 29030	6. Signature <u>Robin Rissell</u> Date <u>1/16/05</u> Name <small>(Type or Printed)</small> <u>Robin Rissell</u> Title <u>Office manager/Signer</u>														

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Do Not Tape or Staple

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