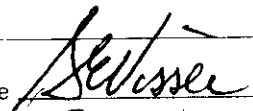


No. <b>W 13334</b>	<b>Due no later than November 30, 2004 Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address <small>Correct in this box, if applicable</small>		STAN E VISSER 870 BLUE LAKES BLVD N # 4 TWIN FALLS, ID 83301												
	GEM STATE STAFFING, LLC STAN VISSER 870 BLUE LAKES BLVD N #4 TWIN FALLS, ID 83301														
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>Manager</td> <td>STAN E. VISSER</td> <td>870 BLUE LAKES BLVD N #4</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</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>	Manager	STAN E. VISSER	870 BLUE LAKES BLVD N #4	TWIN FALLS	ID	83301
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
Manager	STAN E. VISSER	870 BLUE LAKES BLVD N #4	TWIN FALLS	ID	83301										
5. Organized Under the Laws of:  IDAHO W 13334		6. Signature  Date <u>10/12/04</u> Name <small>(Type or Printed)</small> <u>STAN VISSER</u> Title <u>Owner</u>													