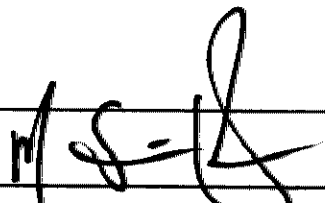
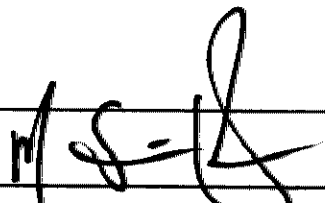
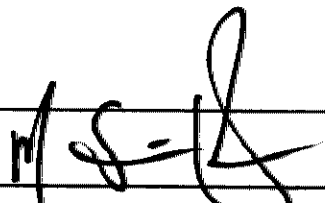


No. C 92122	Annual Report Form Due No Later Than November 30, 1999		2. Registered Agent and Office NOT A P.O. BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct ACTION MECHANICAL COMPANY, I M. SHANE OLSON P.O. BOX V		M. SHANE OLSON 609 N STATE ST SHELLEY ID 83274												
	SHELLEY ID 83274		3. Organized Under the Laws of: ID C 92122												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="0"> <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</td> <td>M. SHANE OLSON</td> <td>P.O. BOX V</td> <td>SHELLEY,</td> <td>ID.</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>	PRESIDENT	M. SHANE OLSON	P.O. BOX V	SHELLEY,	ID.	
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
PRESIDENT	M. SHANE OLSON	P.O. BOX V	SHELLEY,	ID.											
5. Signature of New Registered Agent	6. <table border="0"> <tr> <td>Signature</td> <td></td> <td>Date</td> <td>7-27-99</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>M. SHANE OLSON</td> <td>Title</td> <td>PRES.</td> </tr> </table>			Signature		Date	7-27-99	Name (Typed or Printed)	M. SHANE OLSON	Title	PRES.				
Signature		Date	7-27-99												
Name (Typed or Printed)	M. SHANE OLSON	Title	PRES.												

ISSUED: 07-03-1999

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