	MOTHUCIONO ON HEVEINO			
No. 55173	Idaho Corporation Annual Repor	t Form 2. Registered Agent	and Office	
Return To  Secretary of State Room 203, State rouse Boise, ID 83720  FORFEITED 42/3/90  Reinstatement Fee:	NAMER ID 08051 POISE, Idaho 83704	W ROY BROWN		
		913 B 1900 AY NAMPA ID 8385	2312 N. Cole Rd. Su Boles, ID 83704	
		Road 3. Incorporated Undo of ID		
4. Names and Addresses of Officer	· · · · · · · · · · · · · · · · · · ·	dress <u>City</u>	State Zip	
President: W Roy B Secretary: Evely W Directors: W. Roy Brawn EvelyN Brown	Name Street or P.O. Ad ROWN P.O. BOX Y	164 MAmpa	Fd. 83653	
5. Nature of Business	6. I certify that this Annual Report I true, correct and complete.  Signature Name (Typed or Primad)	has been examined by me and is to  Date Title	the best of my knowledge  H(>/q3  PRe5 —	