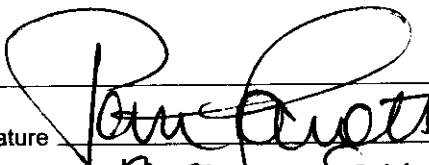


No. C 124300	Due no later than Jun 30, 2003	2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form	PETER SCHOTT																		
	1. Mailing Address (Correct in this box if applicable) SCHOTT GLASS, INC.	1991 CREEKSIDE LN																		
	1991 CREEKSIDE LN	BOISE, ID 83706																		
BOISE, ID 83706	3. <u>New</u> Registered Agent Signature																			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>Peter Schott</td> <td>1991 Creekside Ln.</td> <td>Boise</td> <td>ID</td> <td>83706</td> </tr> <tr> <td>Sec. Treas.</td> <td>Emily Schott</td> <td>Same</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	PRESIDENT	Peter Schott	1991 Creekside Ln.	Boise	ID	83706	Sec. Treas.	Emily Schott	Same			
Office held	Name	Street or P.O. Address	City	State	Zip															
PRESIDENT	Peter Schott	1991 Creekside Ln.	Boise	ID	83706															
Sec. Treas.	Emily Schott	Same																		
5. Organized Under the Laws of: IDAHO C 124300	6. Signature  Date <u>6/5/03</u> Name (Typed or Printed) <u>PETER SCHOTT</u> Title <u>PRESIDENT</u>																			