No. C 83947		Annual Report Form Due No Later Than November 30,	1999	2. Registered Age		
Return to: SECRETARY OF STAT	E 1 Mailing	Address Please Correct if Not Correct		C T COR 300 N.		N SYSTEM
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTI	GAI P.O	ABHE & SVOBODA, INC. GAIL SVOBODA P.O. 90X 251 PRIOR LAKE MN 55372		BOISE ID 8370 3. Organized Under the Laws of:		D 83701
4. Corporations: Enter I	Names and Business A	ddresses of President, Secretary and Di		MN	СС	83947
Limited Liability Com	panies: Enter Names			(check one)		
Office held	<u>Name</u>	Street or P.O. Address		<u>City</u>	<u>State</u>	<u>Zip</u>
Pres/Director	Gail Svoboda	PO BOX 251	Pri	or Lake	MN	55372
Sec/Director	Roxane Svoboda	PO BOX 251	Pri	or Lake	MN	55372
.						
5. Signature of New R	legistered Agent	6. Signature		Date	July 21	L, 1999
		Name (Typed or Roxane Svol	oda	Title .		
ISSUED: 0	7-03-1999	-			3220	