

No. C 80933

Annual Report Form 1996

Due No Later Than November 30,

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

1. Mailing Address - Please Correct, If Not Correct

TESTER'S PORTABLE WELDING AN
LEVENE TESTER
P. O. BOX 517

LEVENE TESTER
ROUTE 1 BOX 2

ST. MARIES ID 83861

NO FEE REQUIRED

** FINAL NOTICE **

ST. MARIES ID 83861

3. Organized Under the Laws of:

ID C 80933

4. Corporations: Enter Names and Addresses of President, Secretary and Directors
Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
President	Levene I Tester	P.O. BOX 517,	ST. MARIES	ID	83861
Secr./V.P.	Tonie M. Tester	1221 Cardinal	Nayden	ID	83838

The Corporation is NOW inactive. We have sold the physical assets as of 12-1-95. Contact me at 208-245-4231 daytime or 208-245-3736 evenings if necessary

5. NATURE OF BUSINESS

WELDING/MACHINE SHOP

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature Levene I. Tester Date 10-15-96

Name Levene I Tester Title Pres.

ISSUED: 10-05-1996

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