Idaho Corporation Annual Report Form Due No Later Than November 1,1991 CRAIG HAWKER		INSTRUCTIO	NS ON REVERSE SIDE	ا ه نو ی و اسان ه	No. 1 Page 1
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED NO FEE REQUIRED KIMBERLY KIMBERLY LD 83341 NO: 0.5761 A. Names and Addresses of Officers and Directors Name President: CRAIG HAWKER 435 HIGHWAY 30 E. KIMBERLY ID 83341 NO: 0.5761 A. Names and Addresses of Officers and Directors Name President: CRAIG HAWKER SINGLE RIVER BEAN COMPANY CRAIG HAWKER 3760 N. 3400 E. KIMBERLY ID 83341 NO: 0.5761 A. Names and Addresses of Officers and Directors Name Street or P.O. Address City State Zip Twin Falls ID 8330/ Twin Falls ID 830/ Twin Falls ID 830/ Twin Falls ID 830/ Twin F	No. 65761	Idaho Corporation Annual Report Form		2. Registered Agent and	Office NOT A P.O. BOX
Secretary of State Room 203, Statehouse Boise, ID 83720 SNAKE RIVER BEAN COMPANY CRAIG HAWKER 435 HIGHWAY 30 E. NO FEE REQUIRED KIMBERLY ID 83341 NO: 05761 4. Names and Addresses of Officers and Directors Name President: Secretary: Secretary: Directors: CRAIG S. HAWKER President: RENAE B. HAWKER CITY State Zip TWIN FAILS ID 83301 TWIN FAILS ID 83301 THOM FAILS ID 83301 Secretary: Directors: C. L. Certify that this Annual Report has been exemined by me and is to the best of my knowledge true, correct and complete. Signature AMDRESSOR Signature AMDRESSOR AMDRESSOR AMDRESSOR AMDRESSOR AMDRESSOR AMDRESSOR Signature AMDRESSOR AMD		Due No Later Than November 1,1991		CRAIG HAWKER	
SNAKE RIVER BEAN COMPANY CRAIG HAWKER 435 HIGHWAY 30 E. NO FEE REQUIRED KIMBERLY ID 83341 NO: 005761 4. Names and Addresses of Officers and Directors Name President: CRAIG S. HAWKER RIVER BEAN COMPANY CRAIG HAWKER RIVER BEAN COMPANY S. ID 83341 NO: 005761 NO: 005761 Fresident: CRAIG S. HAWKER RIVER BEAN COMPANY RIPER RIVER BEAN COMPANY S. ID 83341 NO: 005761 NO: 005761 TWIN FAILS ID 8330/ Secretary: Directors: Street or P.O. Address RIPER RIVER BEAN COMPANY S. ID 83341 NO: 005761 TWIN FAILS ID 8330/ TWIN FAILS ID 8330/ Directors: SINGLE ZID TWIN FAILS ID 8330/ TWIN FAILS ID 8330/ Directors: SNAKE RIVER BEAN COMPANY RIPER RIVER BEAN COMPANY S. ID 83341 NO: 005761 TWIN FAILS ID 8330/ TWIN FAILS ID 8330/ TWIN FAILS ID 8330/ Directors: SNAKE RIVER BEAN COMPANY S. ID 83341 NO: 005761 TWIN FAILS ID 8330/ TWIN FAILS ID 8330/ TWIN FAILS ID 8330/ TWIN FAILS ID 8330/ TWIN FAILS ID 83341 Date 7-8-9/	Secretary of State Room 203, Statehouse	1 Mailing Address - Please Cornet II Not Cornet		3760 N. 3400 E.	
A35 HIGHWAY 30 E. NO FEE REQUIRED KIMBERLY ID 83341 NO: 005761 4. Names and Addresses of Officers and Directors Name President: CRAIQ S. HAWKEL RT 3 Box 6541 TWIN FAILS 10. 83301 Secretary: RENAC B. HAWKEL RT 3 Box 6541 TWIN FAILS 10. 83301 Directors: 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. DRY BEAN PROCESSOR 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 Aug James Date 7-8-91		CRAIG HAWKER		1	
4. Names and Addresses of Officers and Directors Name Name Street or P.O. Address City State Zip President: CRA19 Secretary: Secretary: Directors: CRA19 S. HAWKER RH 3 Box 6541 TWIN FAILS 10. 83301 Directors: 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 Day Date 7-8-91				1	ne Laws
President: CRA19 S. HAWKER RT Box 6541 TWIN FAILS 10. 83301 Secretary: RENAE B. HAWKER RT Box 6541 TWIN FAILS 10. 83301 Directors: 6. I certify that this Annual Report has been exemined by me and is to the best of my knowledge true, correct and complete. DRY BEAN PROCESSOR Signature Signature	NO FEE REQUIRED	KIMBERLY	ID 83341	NO: 065761	
President: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Secretary: Directors: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. HAWKER P. Box 6541 TWIN FAILS 10. 83301 Directors: CRAIQ S. HAWKER P. HAWKER P. HAWKER P. Box 6541 TWIN FAILS 10. 83301 D. Box 6541 TWIN FAILS 10. 833	4. Names and Addresses of Officer	s and Directors			
DRY BEAN PROCESSOR Signature and Complete. Name 7-8-9/	President: CRA19 Secretary: RENA		R+3 Box 6541	TWIN FAILS	10. 83301
DRY BEAN PROCESSOR Signature larg & NUW Date 7-8-91	5. Nature of Business	6. I certify that it	his Annual Report has been exam	nined by me and is to the b	est of my knowledge
Name Printed CRAIG S. HAWKEN Title PRESIDENT	DRY BEAN PROCESS	Signature _	larg & Nawa	Date	7-8-91
	<u>'</u>	Name (7)ped or Printed)	CRAIGIS! HOWKIN	Title	resident