

INSTRUCTIONS ON REVERSE SIDE

554

No. 88077		Idaho Corporation Annual Report Form Due No Later Than November 1, 1993		2. Registered Agent and Office NOT A P.O. BOX	
Return To Secretary of State Room 203, Statehouse Boise, ID 83720		1. Mailing Address LSLS, INC. C. D. KRAMIS 1217 NORTH 20TH		C. D. KRAMIS 1217 NORTH 20TH	
* FIRST NOTICE * NO FEE REQUIRED		BOISE	ID 83702	BOISE	ID 83702
4. Names and Addresses of Officers and Directors		MUST BE PRINTED OR TYPED			
President: Secretary: Directors:		Name Todd J. Kramis	Street or P.O. Address P. O. Box 4053	City Boise	State Zip ID 83011
5. Nature of Business lawn sprinkler maint		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 Name (Typed or Printed) Todd Kramis			
				Date 10-12-93	Title pres