

## INSTRUCTIONS ON REVERSE SIDE

|                      |                                                   |                                               |
|----------------------|---------------------------------------------------|-----------------------------------------------|
| No. 89334            | Idaho Corporation Annual Report Form              | 2. Registered Agent and Office NOT A P.O. BOX |
| Return To            | Due No Later Than November 30, 1995               | LARRY D. GRAVES                               |
| Secretary of State   | 1 Mailing Address - Please Correct If Not Correct | 2399 S ORCHARD                                |
| 700 W Jefferson      | WESTERN BALLISTICS CORPORATION                    | SUITE 205                                     |
| P.O. Box 83720       | LARRY D. GRAVES                                   | BOISE ID 83705                                |
| Boise, ID 83720-0080 | 2399 S ORCHARD                                    | 3. Incorporated Under The Laws of             |
| * FIRST NOTICE *     | SUITE 205                                         | ID                                            |
| NO FEE REQUIRED      | BOISE ID 83705                                    | NO: 89334                                     |

## 4. Names and Addresses of Officers and Directors

| Name                       | Street or P.O. Address | City  | State | Postal Code |
|----------------------------|------------------------|-------|-------|-------------|
| President: Larry D. Graves | 840 Gossett Pl.        | Boise | ID    | 83704       |
| Secretary: L. Van Graves   | 4329 Oxbow             | Boise | ID    | 83704       |
| Directors:                 |                        |       |       |             |

## 5. Nature of Business

Drilling, blasting &  
excavation

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)

Larry D. Graves

Date

7-17-95

Title

Pres.