

July 18, 1998

John Macinnis  
John Macinnis Safety Consulting C81566  
4315 Teton  
Boise ID 837054

RE: John Macinnis Safety Consulting C81566

Greetings:

Please find enclosed your recently submitted annual report for the 1998-1999 fiscal year. We are unable to accept it in its present form. Please make the following correction(s) and return to this office.

Please be certain that the names and addresses of the officers in block 4 are complete. (A notation that the information is the same as last year will not be accepted.) After completing that block, resubmit the annual report to this office.

If You have any questions or need further assistance, please do not hesitate to contact this office at (208) 334-2301.

Very truly yours,

Corporate Division

Enclosures: cited

No. C 81506	<b>Annual Report Form</b> 1996 <i>Due No Later Than November 30,</i>		2. Registered Agent and Office <b>NOT A P.O. BOX</b>													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>  <b>* FIRST NOTICE *</b>	1. Mailing Address - Please Correct, If Not Correct		<b>JOHN MACINNIS</b> <b>4315 TETON</b>													
	<b>JOHN MACINNIS SAFETY CONSULT</b> <b>JOHN MACINNIS</b> <b>4315 TETON</b>  <b>BOISE ID 83705</b>		<b>BOISE ID 83705</b>  3. Organized Under the Laws of: <b>ID C 81506</b>													
4. Corporations: Enter Names and Business Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)  <table border="0" style="width:100%"> <tr> <td style="text-align:center"><u>Office held</u></td> <td style="text-align:center"><u>Name</u></td> <td style="text-align:center"><u>Street or P.O. Address</u></td> <td style="text-align:center"><u>City</u></td> <td style="text-align:center"><u>State</u></td> <td style="text-align:center"><u>Zip</u></td> </tr> <tr><td colspan="6" style="height: 150px;"></td></tr> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>						
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
5. Signature of New Registered Agent		6. Signature <u>John L Macinnis</u> Date <u>7-15-96</u> Name (Typed or Printed) <u>JOHN L. MACINNIS</u> Title <u>PRESIDENT</u>														

ISSUED: 07-03-1998

DO NOT TAPE OR STAPLE

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