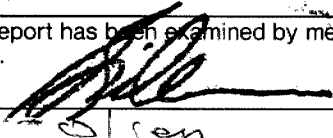
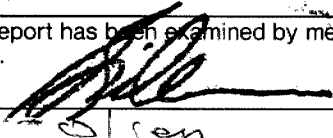
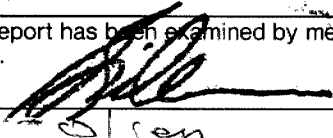


ISSUED: 07-05-1994

No. 94157	Idaho Corporation Annual Report Form		2. Registered Agent and Office						
Return To Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	Due No Later Than November 1, 1994		BRIAN OLSEN						
	1. Mailing Address — FIESTA TIME, INC., NO. 1 BRIAN OLSEN 11250 BELLERIVE DRIVE IDAHO FALLS ID 83404		11250 BELLERIVE DRIVE IDAHO FALLS ID 83404						
4. Names and Addresses of Officers and Directors	MUST BE PRINTED OR TYPED								
	Name President: Brian Olsen Secretary: Directors:	Street or P.O. Address 11250 S. Bellerive	City State Zip I.F. 83404						
5. Nature of Business Restaurant	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="0"> <tr> <td data-bbox="536 909 702 978">Signature</td> <td data-bbox="702 909 1230 978"></td> <td data-bbox="1230 909 1622 978">Date 8-19-94</td> </tr> <tr> <td data-bbox="536 941 702 978">Name (Typed or Printed)</td> <td data-bbox="702 941 1230 978">Brian Olsen</td> <td data-bbox="1230 941 1622 978">Title Owner</td> </tr> </table>			Signature		Date 8-19-94	Name (Typed or Printed)	Brian Olsen	Title Owner
Signature		Date 8-19-94							
Name (Typed or Printed)	Brian Olsen	Title Owner							