| Due No Later Th  | tion Annual Report Form  an November 1, 1.003                                    |   | K\$  | A P.O. BOX   |
|--|--|---|--|--|
| 1 Mailing Address - 7  | an November 1,<br>1993<br>Harrie Correct II (1994 Correct                        |   |  |  |
|  |  | JEFFREY D HICKS<br>22499 CHANNEL RD   |  |  |
| Secretary of State Room 203, Statehouse Boise, ID 83720  JEFFREY D HI 22499 CHANNE |  | CALDWELL ID 93605  3. Incorporated Under The Laws   |  |  |
| CALDWELL   | ID 83605   | of 10<br>NO: 97307  | ne Laws  |  |
| and Directors  | MUST BE PRINTED O  | A TYPED   |  |  |
| Name   | Street or P.O. Address   | City  | State  | <u>Zio</u><br>B 360 5  |
| HILLS  | 4016 AMIL DO.  | UNIONION  | OH.  | 44605  |
| U. PICKS   |  |   |  |  |
|  |  |   |  |  |
|  |  | • •   |  |  |
| 6. I certify that  | this Annual Report has been exam   | ined by me and is to the bo   | est of my k  | nowledge   |
| Signature Name (Tiped or Private)  | Alle Mali  |   | 12-6   | <b>&gt;</b>  |
|  | CALDWELL  B and Directors  Name  O. Hicks  With S  O. Hicks  O. Hicks  Signature | CALDWELL ID 83605  B and Directors MUST BE PRINTED O  Name Street or P.O. Address  JOHNS JOHNS HICKS  HICKS  6. I certify that this Annual Report has been exam true, correct and complete. | CALDWELL  ID 83605  No: 97307  B and Directors  MUST BE PRINTED OR TYPED  Name  Street or P.O. Address  City  D. Hicks  JONES  AND SILL  WHON TOWN  O. HICKS  Signature  Of ID  NO: 97307  AND SILL  NO: 97307  AND SILL  NO: 97307  AND SILL  NO: 97307  NO: | CALDWELL  ID 83605  No: 97307  B and Directors  MUST BE PRINTED OR TYPED  Name  Street or P.O. Address  City  State  JOIC April DO.  UNIONTOWN OH.  6. I certify that this Annual Report has been examined by me and is to the best of my k true, correct and confidete. |