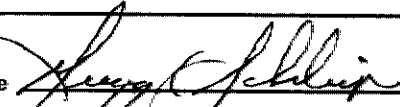
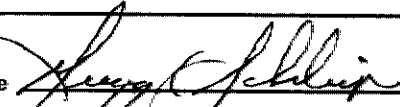
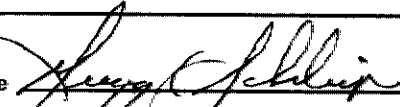


No. C110902	Annual Report Form 1999 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct		GREGORY C SCHLIEPER 143 JOHNSON AVE OROFINO ID 83544													
	GRAPHICS PRINT, INC. GREGORY C SCHLIEPER PO BOX 1047 OROFINO ID 83544		3. Organized Under the Laws of: ID C110902													
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1" data-bbox="0 372 1432 478"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Gregory C. Schlieper</td> <td>147 Johnson Ave PO. 1047</td> <td>Orofino</td> <td>ID</td> <td>83544</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	President	Gregory C. Schlieper	147 Johnson Ave PO. 1047	Orofino	ID	83544
Office held	Name	Street or P.O. Address	City	State	Zip											
President	Gregory C. Schlieper	147 Johnson Ave PO. 1047	Orofino	ID	83544											
5. Signature of New Registered Agent		6. <table border="1"> <tr> <td>Signature </td> <td>Date 8-20-99</td> </tr> <tr> <td>Name (Typed or Printed) Gregory C. Schlieper</td> <td>Title President</td> </tr> </table>			Signature 	Date 8-20-99	Name (Typed or Printed) Gregory C. Schlieper	Title President								
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ISSUED: 07-03-1999

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