	INSTRUCTIO	ONS ON REVERSE SIDE	ISSUED: 06	-30-1990	
No. 45376	Idaho Corporation Annual Report Form		2. Registered Agent and Office		
Return To	Due No Later Than November 1, 1990		JOSEPH P. WILLIAMS		
Secretary of State Room 203, Statehouse Boise, ID 83720	1. Mailing Address — Please Correct		PO BOX 83 (1) 83303-		ત્રે ત્રેકે⊸∢
	INLAND EMPIRE		TWIN FALLS	10 9330	11-2
	P. C. BOX #99	L.Reed William S 160	3. Incorporated Under T	he Laws	283
NO FEE REQUIRED	Nampa THI+ FALLS	83653-0160 ID <del>83381</del>	<del>"</del> .		
4. Names and Addresses of Officer	s and Directors				
	<u>Name</u>	Street or P.O. Address	<u>City</u>	State Zip	
	Reed Williams	1008 Central Pit	- Ln, Mampa	ID 836	
D	everly williams			TD 8301	•
J	ce P. Williams	5192 Ridgecou	rt, Las vegas	MN Raic	-25
5. Nature of Business	6. I certify that the	nis Annual Report has been exan	nined by me and is to the	pest of my knowledge	<del></del>
0	true, correct a	nd complete.	1	10110	-
Carnival	Signature Name (Typed or Printed)	Reed William	Date Title	124/90 res.	

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