


No. 96656 096658 Return To REINSTATEMENT Secretary of State Room 203, Statehouse Boise, ID 83720 Forfeited 12/1/92 REINSTATEMENT FEE: \$20.00	Idaho Corporation Annual Report Form <i>Due No Later Than November 1.</i> 1. Mailing Address — <i>Please Correct</i> PLANNING CONFIGURATION MANAGEMENT AND INTEGRATION, INC. CHARLES ROSS P O BOX 50619 IDAHO FALLS ID 83405	2. Registered Agent and Office KEVIN B HOMER 381 SHOUP AVE IDAHO FALLS ID 83402 3. Incorporated Under The Laws of ID 96656 096658																								
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th data-bbox="41 367 426 845"></th> <th data-bbox="426 367 702 845">Name</th> <th data-bbox="702 367 1181 845">Street or P.O. Address</th> <th data-bbox="1181 367 1362 845">City</th> <th data-bbox="1362 367 1462 845">State</th> <th data-bbox="1462 367 1625 845">Zip</th> </tr> </thead> <tbody> <tr> <td data-bbox="41 367 426 845">President:</td> <td data-bbox="426 367 702 845">CHARLES ROSS</td> <td data-bbox="702 367 1181 845">10414 AUTUMN MEADOW LN</td> <td data-bbox="1181 367 1362 845">HOUSTON</td> <td data-bbox="1362 367 1462 845">TX</td> <td data-bbox="1462 367 1625 845">77064</td> </tr> <tr> <td data-bbox="41 367 426 845">Secretary:</td> <td data-bbox="426 367 702 845">BELINDA JACOBS</td> <td data-bbox="702 367 1181 845">1032 IRVING ST, BOX 104</td> <td data-bbox="1181 367 1362 845">SAN FRAN</td> <td data-bbox="1362 367 1462 845">CA</td> <td data-bbox="1462 367 1625 845">94122</td> </tr> <tr> <td data-bbox="41 367 426 845">Directors:</td> <td data-bbox="426 367 702 845">BELINDA JACOBS</td> <td data-bbox="702 367 1181 845">1032 IRVING ST, BOX 104</td> <td data-bbox="1181 367 1362 845">SAN FRAN</td> <td data-bbox="1362 367 1462 845">CA</td> <td data-bbox="1462 367 1625 845">94122</td> </tr> </tbody> </table>				Name	Street or P.O. Address	City	State	Zip	President:	CHARLES ROSS	10414 AUTUMN MEADOW LN	HOUSTON	TX	77064	Secretary:	BELINDA JACOBS	1032 IRVING ST, BOX 104	SAN FRAN	CA	94122	Directors:	BELINDA JACOBS	1032 IRVING ST, BOX 104	SAN FRAN	CA	94122
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5. Nature of Business CONSULTING	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature  Name (Typed or Printed) CHARLES ROSS Date 10-1-93 Title PRESIDENT																									