

REINSTATEMENT

No. <u>C 92671</u>		Annual Report Form		2. Registered Agent and Office <u>NOT A P.O. BOX</u>																																											
Return to: SECRETARY OF STATE 700 WEST JEFFERSON P.O. BOX 83720 BOISE, ID 83720-0080		1. Mailing Address - Please Correct, If Not Correct		<u>Ralph L. Smith</u> RONALD PUTERBURGH 5112 STINGER <u>3000 N. Columbine</u> BOISE ID 83703 <u>Boise, Idaho 83713</u>																																											
FEE DUE <u>30-</u>		Dr. ALPINE PRODUCTIONS, INC RALPH SMITH 24 VIEWPOINT PL <u>3000 N. Columbine</u> LACUNA NISQUEL CA 92677 <u>Boise, Idaho 83713</u>		3. Organized Under the Laws of: IDAHO																																											
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"> <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>Chairman/C.E.O.</td> <td>Dr. Ralph Smith</td> <td>3000 N. Columbine</td> <td>Boise</td> <td>Idaho</td> <td>83713</td> </tr> <tr> <td>President/C.O.O.</td> <td>Mr. William Mitchell</td> <td>66 Charleston</td> <td>Colode Caza</td> <td>CA</td> <td>92679</td> </tr> <tr> <td>Secretary/Director</td> <td>Ms. Sabrina Bowman</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Director</td> <td>Mr. Peter Phillips</td> <td>2480 Mobile Dr.</td> <td>Boise</td> <td>Idaho</td> <td>83709</td> </tr> <tr> <td>Director</td> <td>Mr. Peter Phillips</td> <td>43 Valley Str.</td> <td>Delaware</td> <td>New Jersey</td> <td>07833</td> </tr> <tr> <td>Director</td> <td>Mr. Ron Hall</td> <td>1308 Waterways</td> <td>Ann Harbor</td> <td>Michigan</td> <td>48106</td> </tr> </tbody> </table>						Office Held	Name	Street or P.O. Address	City	State	Zip	Chairman/C.E.O.	Dr. Ralph Smith	3000 N. Columbine	Boise	Idaho	83713	President/C.O.O.	Mr. William Mitchell	66 Charleston	Colode Caza	CA	92679	Secretary/Director	Ms. Sabrina Bowman					Director	Mr. Peter Phillips	2480 Mobile Dr.	Boise	Idaho	83709	Director	Mr. Peter Phillips	43 Valley Str.	Delaware	New Jersey	07833	Director	Mr. Ron Hall	1308 Waterways	Ann Harbor	Michigan	48106
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5. Signature of New Registered Agent			6.																																												
<u>Dr. Ralph L. Smith</u>			Signature <u>Dr. Ralph L. Smith</u> Date <u>03/17/98</u> Name (Typed or Printed) <u>Dr. Ralph L. Smith</u> Title <u>Chairman/CEO</u>																																												

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SECRETARY OF STATE

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- 1.) Please pay special attention to the mailing address. If it is incorrect, please make the appropriate corrections.
NOTE: The name of the business entity cannot be altered on the annual report form.
- 2.) If the registered agent has changed or moved, please make that correction on this form. The registered agent must be found IN IDAHO at a PHYSICAL ADDRESS. PO Boxes WILL NOT be accepted. If report is for a Limited Liability please refer to #4 below.
- 3.) Corporation: Enter names and addresses of ONLY the president, secretary, and directors in block 4.
Limited Liability Company: Enter the names and addresses of the managers or members in block 4.
NOTE: Putting "same as last year" WILL NOT be accepted.
- 4.) Limited Liability Company: If the registered agent has been changed in block 2, then the NEW registered agent must accept that position by signing in block 5.
- 5.) Corporation: Block 6 must be signed by an officer or chairman of the board of the corporation. Signer must specify his or her title.
Limited Liability Company: Block 6 must be signed by a manager or member, who must specify his or her title.
- 6.) If new registered Agent, please sign block 5.