

No. 0105910	Annual Report Form Due No Later Than November 30, 1996		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 HAGER GLASS, INC. BILL HAGER 239 LOCUST SOUTH TWIN FALLS ID 83301		BILL HAGER 239 LOCUST SOUTH TWIN FALLS ID 83301 ID 0108810																		
	3. Organized Under the Laws of: ID 0108810																				
4. Corporations: Enter Names and 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" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Office held</th> <th style="width: 20%;">Name</th> <th style="width: 30%;">Street or P.O. Address</th> <th style="width: 15%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Zip</th> </tr> </thead> <tbody> <tr> <td>PRESIDENT + DIRECTOR</td> <td>BILL HAGER</td> <td>329 FALLS AVE W</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>V. PRESIDENT, SECRETARY + DIRECTOR</td> <td>JAMIE HAGER</td> <td>329 FALLS AVE W</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	PRESIDENT + DIRECTOR	BILL HAGER	329 FALLS AVE W	TWIN FALLS	ID	83301	V. PRESIDENT, SECRETARY + DIRECTOR	JAMIE HAGER	329 FALLS AVE W	TWIN FALLS	ID	83301
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5. NATURE OF BUSINESS ANY LAWFUL GLASS		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 <u>Jamie Hager</u> Date <u>11-5-96</u> Name (Typed or Printed) <u>JAMIE HAGER</u> Title <u>VPRES</u>																			

ISSUED: 07-06-1996

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