ee ee ta ee	INSTRUCTION	ONS ON REVERSE SIDE	" TOCHEN COZ	-14.44.4.0.T
Na. 80933	Idaho Corporatio	on Annual Report Form	2. Registered Agent and	Office NOT A P.O. BO
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 Leven	Due No Later Than November 1,		ROBERT LANE	TESTER 🗡
	1 Mailing Addio 1997	2 - Consent D. Men Consent	ROUTE 4 .	
	TESTER PORTABLE WELDING, INC. ROBERT LANE TESTER P. 0. BOX 517		ST. MARIES	10 83861
			3. Incorporated Under The Laws	
* FIRST NOTICE *	100000000000000000000000000000000000000		of ID	
NO FEE REQUIRED	ST. MARIES	ID 83861	NO: 80933	
I. Names and Addresses of Office	rs and Directors	MUST BE PRINTED C	RYFED	
	Name	Street or P.O. Address	City	State Zio
President:	Levene I. Tester	P.O. Box 517,	St. Maries	ID 83861
Secretary:	Tonie M. Tester	P. O. Box 517	St. Maries	ID 83861
Directors:	Jon Gravestock	HC 01, Box 58400	St. Maries	ID 83861
	David J. Bentcik	HCO4, Box 15	St. Maries	ID 83861
	une Tester is decea address of shop and	sed. d office is HC 01, Box	1, St. Maries, I	D 83861
5. Nature of Business Welding/Machine shop	true, correct	this Annual Report has been exar and complete.	Date	7-9-93
"orating imontine priop	Name (Tiped or Printed)	Levene I. Tester	Tittle President	