| No. C 87376   | Annual Report Form 1995 Due No Later Than November 30,                             | 2. Registered Agent and Office NOT A P.O. BOX ROBERT O MEYER |
|---|--|--|
| SECRETARY OF STATE  | g Address - Please Correct, If Not Correct   | 1433 BLUEBELL CIR  |
| PO BOX 8372   | ERT O MEYER 3 BLUEBELL CIR   | POCATELLO ID 83201   |
| NO FEE REQUIRED 56  |  | 3. Organized Under the Laws of:                              |
| ** FIL NOTICE ## POC  | ATELLO ID 83201  | ID C 87376   |
| 4. Color ations: Enter Names and Address mited Liability Companies: Enter Names | es of President, Secretary and Directors<br>and Addresses of   Managers or  Member | rs (check one)   |
| Office held Name  | Street or P.O. Address   | City, // State Zip   |
| Pres. / Vice Pres. Robert O.  | Meyer 1433 Bluebell Cir  | Pocatello, Id. 83201   |
| Sec. Trags. Debra A. 1  | Street or P.O. Address Meyer 1433 Bluebell Cir. Neyer 1433 Bluebell Cir. Fe        | ecatelle, Id. 83201  |
| 5. NATURE OF BUSINESS   | I certify that this Annual Report has been knowledge true confect and complete.    |  |
| PIZZA DELIVERY  | Signature  | eyer Title Pres.   |
| ISSUED: 10-05-1996  | DO NOT TAPE OR STAPLE  | 248  |
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