· · · · · · · · · · · · · · · · · · ·	INSTRU	ICTIONS ON REVERSE, SIDE		og v= v y og
No. 62712	4	ration Annual Report Form	2. Registered Agent and Office NOT A P.O. BO	
Return To Secretary of State Room 203, Statehouse Boise, ID 83720	Due No Later Than November 1,1993 1. Mailling Addones: 700 on 1,000 to 1,0		3. Incorporated Under The Laws	
** FINAL NOTICE ** NO FEE REQUIRED	POISE	10 83709	of ID NO: 62712	
4. Names and Addresses of Officer	s and Directors	MUST BE PRINTED C	OR TYPED	
	<u>Name</u>	Street or P.O. Address	City	State Zip
President: Ma	ribeth Hora	in 7480 Lemni St	6 Boise	ID 83709
Secretary: Christi Directors:	opher E. Dirs	tine 7480 Lemni St	Borse	1D 83709
	•			
. Nature of Business	6. I certify to	that this Annual Report has been examed and complete.	mined by me and is to the	best of my knowledge
Filing system & Equ	Prum Signature	Marcheth Hora-	Date /	0/15/93
	Name Printed	σ · · · · · · · · · · · · · · · · · · ·	Title 70	esident.