

INSTRUCTIONS ON REVERSE SIDE

No. 64819	Idaho Corporation Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX																									
Return To	Due No Later Than November 305		BILL OR SHARI FILLER 7415 N. GOVERNMENT WAY																									
Secretary of State 700 W Jefferson P.O. Box 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address - Please Correct If Not Correct BAILEY INVESTMENTS, INC. BILL OR SHARI FILLER P O BOX 825		HAYDEN LAKE ID 83835																									
	HAYDEN LAKE ID 83835		3. Incorporated Under The Laws of ID NO: 64819																									
4. Names and Addresses of Officers and Directors																												
<table border="1"> <thead> <tr> <th></th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Shari Filler</td> <td>PO Box 3023</td> <td>Hayden</td> <td>ID</td> <td>83835</td> </tr> <tr> <td>Secretary:</td> <td>Bill Filler</td> <td>PO Box 3023</td> <td>Hayden</td> <td>ID</td> <td>83835</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						Name	Street or P.O. Address	City	State	Postal Code	President:	Shari Filler	PO Box 3023	Hayden	ID	83835	Secretary:	Bill Filler	PO Box 3023	Hayden	ID	83835	Directors:					
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Secretary:	Bill Filler	PO Box 3023	Hayden	ID	83835																							
Directors:																												
5. Nature of Business convenience store		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>Shari Filler</u> Date <u>7/17/95</u> Name (Typed or Printed) <u>Shari Filler</u> Title <u>President</u>																										