Sign of the sign o	n instru	CTIONS ON REVERSE SIDE	C : DBUZZI .	7 m 1 m 1 0 0 ₹
No. 93505	1	ation Annual Report Form	2. Registered Agent a	nd Office NOT A P.O.
Return To  Secretary of State Room 203, Statehouse Boise, ID 83720  * FIRST NOTICE *	Due No Later Than November 1, 1993 1. Mailing Address — Please Correct II Not Correct		DANIEL L STOPEY 1316 29TH STPEET	
	DLS EXPRESS, INC. DANIEL L STOREY 1316 29TH STREET		LEWISTON  3. Incorporated Under of 1 D	ID 8350
NO FEE REQUIRED	LEWISTON	10 83501	NO: 93505	
4. Names and Addresses of Office	rs and Directors	MUST BE PRINTED	OR TYPED	
	Name	Street or P.O. Address	<u>City</u>	State Zip
President: DAN A Secretary: Directors:	D. STUREY	1316 29th St 1316 29th St	LEWISTON	IO 835
5. Nature of Business	6. I certify ti	hat thịs Annual Report has beeg ex	amined by me and is to the	e best of my knowledge
Small parcel	true, com	ect and complete.	Date	9-6-43
	Printed)	WICKIE - STOREY	Title 52	<u>رح.</u>

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