

INSTRUCTIONS ON REVERSE SIDE

No. 064991		Idaho Corporation Annual Report Form Due No Later Than November 1, 1987		2. Registered Agent and Office		
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 RECEIVED SEC. OF STATE 87 OCT 19 AM 9 25		1. Mailing Address - Please Correct SULLIVAN REOIL-MIX, INC. THOMAS W. SULLIVAN MC 63, BOX 1702 CHALLIS, IDAHO 83226		THOMAS W. SULLIVAN CHALLIS CREEK RD., PO BOX 88 CHALLIS, IDAHO 83226		
				3. Incorporated Under The Laws of STATE OF IDAHO		
4. Names and Addresses of Officers and Directors						
	Name	Street or P.O. Address	City	State	Zip	
President:	TOM SULLIVAN	MC 63 Box 1702	CHALLIS	IDA	83226	
Secretary:	LINDA SULLIVAN	MC 63 Box 1702	CHALLIS	IDA	83226	
Directors:	LEW FROST	P.O. Box 318	CHALLIS	IDA	83226	
5. Nature of Business CONCRETE		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 <i>Linda Sullivan</i> Name <small>Typed or Printed</small> LINDA SULLIVAN		Date Oct. 9, 1987 Title Sec.		

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