

INSTRUCTIONS ON REVERSE SIDE

No. 81644	Idaho Corporation Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX																					
Return To	Due No Later Than November 30, 1995		JUANITA LYONS																					
Secretary of State 700 W. Jefferson P.O. Box 83726 Boise, ID 83720-0060 * FIRST NOTICE NO FEE REQUIRED IDHO	1. Mailing Address -- Please Correct if Not Corrected		117 MAIN AVENUE																					
	GRANNY'S PANTRY, INC. JUANITA LYONS 245 12TH STREET		ST. MARIES ID 83861																					
	ST. MARIES ID 83861		3. Incorporated Under The Laws of ID NO: 81644																					
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <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 colspan="4">Juanita Lyons 245 12th ST. ST. Maries Id. 83861</td> </tr> <tr> <td>Secretary:</td> <td colspan="4"></td> </tr> <tr> <td>Directors:</td> <td colspan="4"></td> </tr> </tbody> </table>					Name	Street or P.O. Address	City	State	Postal Code	President:	Juanita Lyons 245 12th ST. ST. Maries Id. 83861				Secretary:					Directors:				
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President:	Juanita Lyons 245 12th ST. ST. Maries Id. 83861																							
Secretary:																								
Directors:																								
5. Nature of Business	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>Juanita Lyons</u> Date <u>7-20-95</u> Name (Typed or Printed) <u>Juanita Lyons</u> Title <u>PRES</u>																							

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