No. C 69775	Annual Report Form Due No Later Than November 30,	1996 2. Registered Agent and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON	1. Mailing Arthrops - Please Correct, If Not Correct	1255 STATE STREET
PO BOX 83720 BOISE, ID 83720-0080	FORMAT INC. LAWRENCE FORTIN	WEISER ID 83672
NO FEE REQUIRED	1255 STATE STREET	3. Organized Under the Laws of:
* FIRST NOTICE *	WEISER ID 8367	2 ID C 69776
	nd Addresses of President, Secretary and Directo nter Names and Addresses of I Managers or I	rs I Members (check one)
Office held Name	Street or P.O. Address	<u>City</u> <u>State</u> <u>Zip</u>
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ec-Thean Mank	A. Matteff - 9001 Ri	tost weken Id 13672 Umride an., Baks . Id 21703
	6. I certify that this Annual Report	has been examined by me and is to the best of my
	6. I certify that this Annual Report knowledge true, correct and col. Signature	has been examined by me and is to the best of my holete.
<u>. </u>	6. I certify that this Annual Report knowledge true, correct and coll Signature	has been examined by me and is to the best of my holete.
NATURE OF BUSINES	6. I certify that this Annual Report knowledge true, correct and collection of Signature Name (Typed or Printed)	has been examined by me and is to the best of my holete.
5. NATURE OF BUSINES PIZZA RESTAURAN	6. I certify that this Annual Report knowledge true, correct and collection of Signature Name (Typed or Printed)	has been examined by me and is to the best of my inplete. Date