| | | | | ISSUED: | 07-05-199 | | |
|---|-----------------------------|--|--------------------------------|--|--|------------|--|
| Due No | | Corporation Annual Report Form lo Later Than November 1,4994 | | 2. Registered Agent and Office VICTOR FRABOTTA 509 E. PINE | | | |
| Return To | 1. Mailing Address - | | | | _ | | |
| Secretary of State Room 203, Statehouse | VICCO PLUM | ING, INC. | | MCCALL | ID | | |
| P.O. BOX 83720 Boise, ID 83720-0080 | VICTOR FRABUTTA BOX 4269 | | 3. Incorporated Under The Laws | | | | |
| * FIRST NOTICE * NO FEE REQUIRED | MCCALL | ID 8 | 3638 | of ID NO: 69624 | - | | |
| 4. Names and Addresses of Officer | s and Directors | | | | | | |
| | <u>Name</u> | Street or P | O. Address | <u>City</u> | <u>State</u> | <u>Zip</u> | |
| President: Victor Frabotta | | 509 Pine- | P.o. Box 4269 | Me CA II | Fach | 83638 | |
| Secretary: L;III:c Fhabatt Directors: | • | " | ,, | - # | , , | | |
| Victor France | | tr | 4 | H | · // // // // // // // // // // // // // | * | |
| 0.11.2 | | ** | ** | N | | " | |
| F 1 | | | | | | | |
| 5. Nature of Business | 6. I certify | that this Annual Re | port has been exam | nined by me and is to | o the best of my | knowledge | |
| | · | orrect and complete. | 1 1 1 27 | Date | 2-11-8 | y | |
| Plumbing Contrac | tor Signature Name (Type | | Frabotta | Title | | | |