

INSTRUCTIONS ON REVERSE SIDE

No. 46974	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991		2. Registered Agent and Office NOT A P.O. BOX
Return To Secretary of State Room 203, Statehouse Boise, ID 83720	1. Mailing Address - Please Correct If Not Correct		JOHN P. TABERNA HIWAY 95, WEST OF CITY
NO FEE REQUIRED	WESTERN LABORATORIES, INC. JOHN P. TABERNA P.O. BOX 400 PARMA	ID 83660	PARMA ID 83660

4. Names and Addresses of Officers and Directors

Name	Street or P.O. Address	City	State	Zip
President: JOHN P. TABERNA	P.O. BOX 1020	PARMA	ID	83660
Secretary: [REDACTED]				
Directors: [REDACTED]				

5. Nature of Business

SOIL TESTING LAB

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
Name (Type or Print)



JOHN P TABERNA

Date 9-31-91
Title PRESIDENT