	INSTRUCTIO	ONS ON REVERSE SIDE	ISSUED JULY 1,	
No. 51324	Idaho Corporation Annual Report Form		2. Registered Agent and Office	
Return To	Due No Later Than		CALVIN JONES 952 South 1400	EAST
Secretary of State	1. Mailing Address — Please			
Room 203/Statehouse Boise, JD 83720	CALVIN JONES	CATTLE CORPORATIO	EDEN	10 833
SEC. OF STATE	952 SOUTH 1400 EAST		3. Incorporated Under The Laws	
89 NEEZREOPHRED 2	EDEN	10 83325	of IDAHO	
4. Names and Addresses of Office	rs and Directors			NO: 51324
	Name	Street or P.O. Address	<u>City</u>	State Zip
President: CALVIW JOX		9525 1400 E	EOCIV	10AHO 8332
Secretary: BCTTY Jo =	101/0 C 7	\mathcal{D}_{i}	//	11
CEVIN JON	्ट	11 Commence	/1	10
ANGELA 11		n = 1	/1	<i>j</i> (
CURT		1)	/1	11
AMBER "		, /1	Λ	/1
7			$\sim R_{\odot}$	11-4
5. Nature of Business	6. I certify that th	is Annual Report has been exar	nined by me and is to the b	est of my knowledge
LIVESTOCK	true, correct ar	alú Jour		-25-89
	Name (Typed or Printed)	CALVIN JONES	Title 7	RESI UCNT

AND TO THE SECOND OF THE SECOND SECON