

No. C 73914	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 PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct PRINTING PRESS, INC. (THE) MICHAEL L. PETERS P. O. BOX 9243 BOISE ID 83707 3243		MICHAEL L. PETERS 325 GROVE STREET BOISE ID 83702 3. Organized Under the Laws of: ID C 78914																									
* FIRST NOTICE *																												
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Pres.</td> <td>Michael L. Peters</td> <td>1000 Glen Haven Dr.</td> <td>Boise,</td> <td>ID</td> <td>83705</td> </tr> <tr> <td>V.P.</td> <td>Lynette M. Peters</td> <td>1000 Glen Haven Dr.</td> <td>Boise,</td> <td>ID</td> <td>83705</td> </tr> <tr> <td>Sec./Treas.</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Pres.	Michael L. Peters	1000 Glen Haven Dr.	Boise,	ID	83705	V.P.	Lynette M. Peters	1000 Glen Haven Dr.	Boise,	ID	83705	Sec./Treas.					
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5. NATURE OF BUSINESS COMMERCIAL PRINTING	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>Lynette M. Peters</u> Date <u>7-20-96</u> Name (Typed or Printed) <u>Lynette M. Peters</u> Title <u>V.P.</u>																											

ISSUED: 07-06-1996

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