INSTRUCTIONS ON REVERSE SIDE

ISSUED: 07-04-1995

No. 97990

Idaho Corporation Annual Report Form

Due No Later Than November 30, 1995

Return To

Secretary of State
700 W Jefferson
P.O. Box 83720
Boise, ID 83720-0080

* FIRST NOTICE *
NO FEE REQUIRED

1. Mailing Address -- Please Correct If Not Correct

MAGIC VALLEY EXTINGUISHERS, INC
GARY L CRAVENS
PO BOX 384

FILER ID 83328

2. Registered Agent and Office NOT A P.O. BOX

GARY L CRAVENS
501 FIFTH STRETT

FILER ID 83328

3. Incorporated Under The Laws of

ID
NO: 97990

4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Postal Code
President:	GARY L. CRAVENS	BOX 384	FILER	ID	
Secretary:	MARIE CRAVENS	BOX 384	FILER	ID	
Directors:					

5. Nature of Business

FIRE EXTINGUISHER SALES & SERVICE

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 Gary L Cravens Date 7-9-95

Name (Typed or Printed) GARY L. CRAVENS Title PRESIDENT