

ISSUED: 07-07-1993

No. 87391	<b>Idaho Corporation Annual Report Form</b>		2. Registered Agent and Office <b>NOT A P.O. BOX</b>																									
Return To  <b>Secretary of State Room 203, Statehouse Boise, ID 83720</b>  * FIRST NOTICE * NO FEE REQUIRED	Due No Later Than November 1, 1993		MARK D. STUBBS 532 WASHINGTON STREET NORTH  TWIN FALLS ID 83301																									
	1. Mailing Address <i>(Please Print or Type Name)</i>  SNAKE RIVER PIZZA, INC. MARK D. STUBBS 532 WASHINGTON STREET NORTH  TWIN FALLS ID 83301																											
3. Incorporated Under The Laws of ID NO: 87391																												
4. Names and Addresses of Officers and Directors <b>MUST BE PRINTED OR TYPED</b> <table border="1"> <thead> <tr> <th></th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>TAMI WALKER</td> <td>2927 9TH AVENUE E.</td> <td>TWIN FALLS,</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Secretary:</td> <td>MARK STUBBS</td> <td>516 2ND ST. E.</td> <td>TWIN FALLS,</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						Name	Street or P.O. Address	City	State	Zip	President:	TAMI WALKER	2927 9TH AVENUE E.	TWIN FALLS,	ID	83301	Secretary:	MARK STUBBS	516 2ND ST. E.	TWIN FALLS,	ID	83301	Directors:					
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Directors:																												
5. Nature of Business  PIZZA SALES & DELIVERY		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>Tami Walker</u> Date <u>8-3-93</u> Name <i>(Typed or Printed)</i> <u>Tami Walker</u> Title <u>President</u>																										