

INSTRUCTIONS ON REVERSE SIDE

No. 107832	Idaho Corporation Annual Report Form		2. Registered Agent and Office																															
Return To	Due No Later Than November 1,		STEVEN MOCK																															
Secretary of State	1. Mailing Address — Please Correct		7305 NORTH & SOUTH HWY																															
Room 201, Statehouse	TARP SHOP, INC.		LEWISTON ID 83554																															
Boise, ID 83720	STEVEN MOCK		3. Incorporated Under The Laws																															
FORFEIT 12/12/96	PO BOX 1067		of																															
STATE OF IDAHO	LEWISTON ID 83501		Idaho																															
4. Names and Addresses of Officers and Directors																																		
<table border="1"> <thead> <tr> <th></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>President:</td> <td>Steven Mock</td> <td>P.O. Box 1067</td> <td>Lewiston</td> <td>ID</td> <td>83501</td> </tr> <tr> <td>Secretary:</td> <td>Lynnette A. Nelson</td> <td>P.O. Box 208</td> <td>Lewiston</td> <td>ID</td> <td>83501</td> </tr> <tr> <td>Directors:</td> <td>Arthur E. Nelson</td> <td>P.O. Box 713</td> <td>Lewiston</td> <td>ID</td> <td>83501</td> </tr> <tr> <td>Treasurer</td> <td>Steven Mock</td> <td>P.O. Box 1067</td> <td>Lewiston</td> <td>ID</td> <td>83501</td> </tr> </tbody> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	Steven Mock	P.O. Box 1067	Lewiston	ID	83501	Secretary:	Lynnette A. Nelson	P.O. Box 208	Lewiston	ID	83501	Directors:	Arthur E. Nelson	P.O. Box 713	Lewiston	ID	83501	Treasurer	Steven Mock	P.O. Box 1067	Lewiston	ID	83501
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5. Nature of Business Canvas, Seats Enclosures Tarps, Tents, Boat Covers Auto, etc		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 <i>Steven Mock</i> Name (Typed or Printed) Steven Mock Date 12/17/96 Title President																																