

## INSTRUCTIONS ON REVERSE SIDE

ISSUED: 06-30-1990

No. 33637	Idaho Corporation Annual Report Form		2. Registered Agent and Office																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83724 AUG 3 4 49 PM '90 SECRETARY OF STATE NO FEE REQUIRED	Due No Later Than November 1, 1990		DAVID GOSS																									
	1. Mailing Address — Please Correct	407 WEST JEFFERSON																										
	INTER MOUNTAIN CLAIMS SERVI		BOISE ID 83702 589																									
	DAVID GOSS		3. Incorporated Under The Laws of WA																									
	407 WEST JEFFERSON		NO: 033637																									
4. Names and Addresses of Officers and Directors	<table border="0"> <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>ROBERT L. KERSLAKE</td> <td>P.O. Box 25549</td> <td>SEATTLE</td> <td>WA</td> <td>98125</td> </tr> <tr> <td>Secretary:</td> <td>- SAME</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Directors:</td> <td>SAME</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					Name	Street or P.O. Address	City	State	Zip	President:	ROBERT L. KERSLAKE	P.O. Box 25549	SEATTLE	WA	98125	Secretary:	- SAME					Directors:	SAME				
		Name	Street or P.O. Address	City	State	Zip																						
President:	ROBERT L. KERSLAKE	P.O. Box 25549	SEATTLE	WA	98125																							
Secretary:	- SAME																											
Directors:	SAME																											
5. Nature of Business	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.																											
CLAIMS SERVICE	Signature <i>Robert Kerslake</i> Name (Typed or Printed) ROBERT KERSLAKE		Date 7/30/90 Title PRES.																									