·	INSTRUCTIONS ON REVERSE SIDE	ISSUED: 06-30-1990  2. Registered Agent and Office
No. 50179  Return To  Secretary of State Room 203, Statehouse Boise, ID 83720	Due No Later Than November 1, 1990  1. Mailing Address — Please Correct	JOHN S. LEWIS 1163 EAST 25TH STREET
	FALLS SALES, INC. JOHN S. LEWIS P. O. BOX 1389	IDAHO FALLS ID 83401 23 3. Incorporated Under The Laws
		of ID
NO FEE REQUIRED  4. Names and Addresses of Office	IDAHO FALLS ID 83401	NO: 050179
President: Secretary: Directors:	Name Street or P.O. Address  John R Lewis PO Box a  Kimberly G Lewis "	626 APO SF 96555
5. Nature of Business  5ALES	6. I certify that this Annual Report has been extrue, correct and complete.  Signature Name (Typed or Name Printed)	xamined by me and is to the best of my knowledge  Date 8-15-90  Title Hed; President