

No. C 90157	Annual Report Form <i>Due No Later Than November 30,</i> 1997		2. Registered Agent and Office NOT A P.O. BOX H. JAMES MAGNUSON 816 SHERMAN AVENUE COEUR D'ALEN ID 83814		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct K.I. CORP. TOM MAGNUSON BOX 469 WALLACE ID 83873		3. Organized Under the Laws of: ID C 90157		
** FINAL NOTICE **					
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Thomas R. Magnuson	Box 469	Wallace	ID	83873
Secretary	Mark W. Absec	Box 469	Wallace	ID	83873
Director	Thomas R. Magnuson	Box 469	Wallace	ID	83873
5.		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><i>Mark W. Absec</i></u> Date <u>10/15/97</u> Name (Typed or Printed) <u>Mark W. Absec</u> Title <u>Secretary</u>			

ISSUED: 10-04-1997

11148