

No. 103399	Idaho Corporation Annual Report Form Due No Later Than November 1, 1988	2. Registered Agent and Office																				
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 RECEIVED SEC. OF STATE 98 JUL 29 AM 9 00	1. Mailing Address — Please Correct 063399 TRACEABILITY SYSTEMS, INC. GARY A. JACOBSEN P.O. BOX 6573 BOISE, ID 83701	GARY A. JACOBSEN 1716 NORTH 9TH STREET BOISE, ID 83702 3. Incorporated Under The Laws of : STATE OF TEXAS																				
4. Names and Addresses of Officers and Directors																						
	<table border="1"> <thead> <tr> <th data-bbox="409 388 723 436">Name</th> <th data-bbox="723 388 1058 436">Street or P.O. Address</th> <th data-bbox="1058 388 1318 436">City</th> <th data-bbox="1318 388 1433 436">State</th> <th data-bbox="1433 388 1609 436">Zip</th> </tr> </thead> <tbody> <tr> <td data-bbox="409 436 723 484">President: Gary A. Jacobsen</td> <td data-bbox="723 436 1058 484">P.O. Box 6574</td> <td data-bbox="1058 436 1318 484">Boise</td> <td data-bbox="1318 436 1433 484">ID</td> <td data-bbox="1433 436 1609 484">83701</td> </tr> <tr> <td data-bbox="409 484 723 532">Secretary: Craig E. Chastwood</td> <td data-bbox="723 484 1058 532">2315 W. Driveway</td> <td data-bbox="1058 484 1318 532">Eugene</td> <td data-bbox="1318 484 1433 532">OR</td> <td data-bbox="1433 484 1609 532">97402</td> </tr> <tr> <td data-bbox="409 532 723 835">Directors: Gary A. Jacobsen</td> <td data-bbox="723 532 1058 835">P.O. Box 6574</td> <td data-bbox="1058 532 1318 835">Boise</td> <td data-bbox="1318 532 1433 835">ID</td> <td data-bbox="1433 532 1609 835">83701</td> </tr> </tbody> </table>	Name	Street or P.O. Address	City	State	Zip	President: Gary A. Jacobsen	P.O. Box 6574	Boise	ID	83701	Secretary: Craig E. Chastwood	2315 W. Driveway	Eugene	OR	97402	Directors: Gary A. Jacobsen	P.O. Box 6574	Boise	ID	83701	ENTERED AUG 4 1988
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5. Nature of Business DP/Health/Financial	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>Gary A. Jacobsen</u> Date <u>7/24/88</u> Name (Typed or Printed) <u>GARY A. JACOBSEN</u> Title <u>PRES.</u>																					