INSTRUCTIONS ON REVERSE SIDE	
Idaho Corporation Annual Report Form	2. Registered Agent and Office
Due No Later Than November 1, 1987	PAUL JACASSEN
1. Mailing Address — Please Correct 048514	
PAUL JACOBSEN, OVN. P.A.	SHOSHONE, LOAND
PAUL JACOBSEN	Incorporated Under The Laws     of
15138 PONS . IOAHO	STATE OF IDAHO
rs and Directors	
Name Street or P.O. Address	City State Zip
cobsen D.V.M. Box 647	Shoshone Idaho 83352 Shoshone Idaho 83352
obser DV.m Box 647	Shoshone Idoho 83352
	ENTERED
	JUL 20 1987
	JOE # 0 1307
ľ	Idaho Corporation Annual Report Form  Due No Later Than November 1, 1987  1. Mailing Address — Please Correct 048514  PAUL JACOBSEN. DVM. P.A.  FAUL JACOBSEN. DVM. P.A.  FAUL JACOBSEN.  BOX 647  10AHO  s and Directors

5. Nature of Business Veterinary Practise 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 Name (Typed or Printed)

Title Lacobser