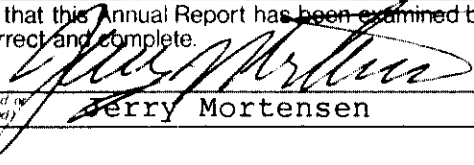
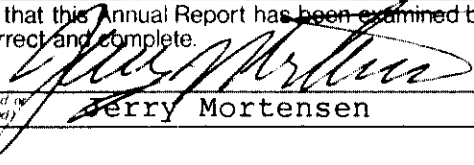
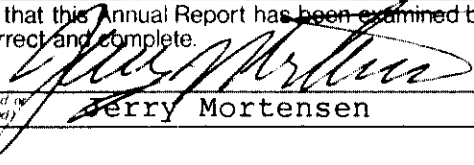


77035

No.	Idaho Corporation Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX																																											
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE * NO FEE REQUIRED	Due No Later Than November 1, 1992		JERRY MORTENSEN																																											
	1. Mailing Address — Please Correct, If Not Correct		540 W. CHERRY LANE																																											
	JERRY MORTENSEN AND ASSOCIATES, JERRY MORTENSEN P. O. BOX 812 MERIDIAN ID 83642 0000		MERIDIAN ID 83642 3. Incorporated Under The Laws of ID NO: 77035																																											
4. Names and Addresses of Officers and Directors <table border="1"> <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>Jerry Mortensen</td> <td>4045 Greenmeadow Dr</td> <td>Meridian</td> <td>Id</td> <td>83642</td> </tr> <tr> <td>Secretary:</td> <td>Lorraine Mortensen</td> <td>4045 Greenmeadow Dr</td> <td>Meridian</td> <td>Id</td> <td>83642</td> </tr> <tr> <td>Directors:</td> <td>Terri Thomas</td> <td>771 W. Sierra</td> <td>Clovis, Ca</td> <td>Id</td> <td>93612</td> </tr> <tr> <td></td> <td>Brenda Cannon</td> <td>3245 Edson Cir</td> <td>Boise,</td> <td>Id</td> <td>93705</td> </tr> <tr> <td></td> <td>Lynn Mortensen</td> <td>9720 Whirlaway</td> <td>Boise</td> <td>Id</td> <td>83704</td> </tr> <tr> <td></td> <td>Max Mortensen</td> <td>4045 Greenmeadow Dr</td> <td>Meridian</td> <td>Id</td> <td>83642</td> </tr> </tbody> </table>						Name	Street or P.O. Address	City	State	Zip	President:	Jerry Mortensen	4045 Greenmeadow Dr	Meridian	Id	83642	Secretary:	Lorraine Mortensen	4045 Greenmeadow Dr	Meridian	Id	83642	Directors:	Terri Thomas	771 W. Sierra	Clovis, Ca	Id	93612		Brenda Cannon	3245 Edson Cir	Boise,	Id	93705		Lynn Mortensen	9720 Whirlaway	Boise	Id	83704		Max Mortensen	4045 Greenmeadow Dr	Meridian	Id	83642
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5. Nature of Business Insurance		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="0"> <tr> <td>Signature</td> <td></td> <td>Date</td> <td>7-16-92</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Jerry Mortensen</td> <td>Title</td> <td>President</td> </tr> </table>			Signature		Date	7-16-92	Name (Typed or Printed)	Jerry Mortensen	Title	President																																		
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