


No. 84654	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991	2. Registered Agent and Office NOT A P.O. BOX																								
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	1. Mailing Address - Please Correct If Not Correct A.A.Y.S., INC. STEVEN L. REED P. O. BOX 732 COEUR D'ALENE ID 83814	STEVEN L. REED 1424 SHERMAN SUITE 300 725 N. 4th St. COEUR D'ALENE ID 83814 3. Incorporated Under The Laws of ID NO: 084654																								
4. Names and Addresses of Officers and Directors																										
<table border="1"> <thead> <tr> <th data-bbox="34 384 414 437"></th> <th data-bbox="414 384 745 437">Name</th> <th data-bbox="745 384 1067 437">Street or P.O. Address</th> <th data-bbox="1067 384 1301 437">City</th> <th data-bbox="1301 384 1438 437">State</th> <th data-bbox="1438 384 1615 437">Zip</th> </tr> </thead> <tbody> <tr> <td data-bbox="34 437 414 479">President:</td> <td data-bbox="414 437 745 479">STEVEN L. REED</td> <td data-bbox="745 437 1067 479">P.O. BOX 732</td> <td data-bbox="1067 437 1301 479">COEUR D'ALENE,</td> <td data-bbox="1301 437 1438 479">ID.</td> <td data-bbox="1438 437 1615 479">83814</td> </tr> <tr> <td data-bbox="34 479 414 522">Secretary:</td> <td data-bbox="414 479 745 522">LORA HAGEN</td> <td data-bbox="745 479 1067 522">P.O. BOX 732</td> <td data-bbox="1067 479 1301 522">COEUR D'ALENE,</td> <td data-bbox="1301 479 1438 522">ID.</td> <td data-bbox="1438 479 1615 522">83814</td> </tr> <tr> <td data-bbox="34 522 414 838">Directors:</td> <td data-bbox="414 522 745 838"></td> <td data-bbox="745 522 1067 838"></td> <td data-bbox="1067 522 1301 838"></td> <td data-bbox="1301 522 1438 838"></td> <td data-bbox="1438 522 1615 838"></td> </tr> </tbody> </table>				Name	Street or P.O. Address	City	State	Zip	President:	STEVEN L. REED	P.O. BOX 732	COEUR D'ALENE,	ID.	83814	Secretary:	LORA HAGEN	P.O. BOX 732	COEUR D'ALENE,	ID.	83814	Directors:					
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Directors:																										
5. Nature of Business PRIVATE INVESTIGATIONS	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) STEVEN L. REED Date 7-15-91 Title PRESIDENT																									