

No. C 86494	Annual Report Form Due No Later Than November 30, 1996		2. Registered Agent and Office NOT A P.O. BOX													
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 A & L, INC. LEVY ABRAHAM P.O. BOX 8126 MOSCOW ID 83843		LEVY ABRAHAM 1020 S HARISON MOSCOW ID 83843 3. Organized Under the Laws of: ID C 86494													
<div style="display: flex; justify-content: space-between;"> * FIRST NOTICE * MOSCOW ID 83843 </div> <p>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)</p> <table border="0" style="width: 100%;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>president</td> <td>LEVY ABRAHAM</td> <td>1020 S HARISON</td> <td>MOSCOW</td> <td>ID</td> <td>83843</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	president	LEVY ABRAHAM	1020 S HARISON	MOSCOW	ID	83843
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
president	LEVY ABRAHAM	1020 S HARISON	MOSCOW	ID	83843											
5. NATURE OF BUSINESS IMPORT & EXPORT		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>Abraham Levy</i></u> Date <u>7-15-96</u> Name (Typed or Printed) <u>Abraham Levy</u> Title <u>President</u>														

ISSUED: 07-06-1996

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