

| No. 101065 | Idaho Corporation Annual Report Form Due No Later Than November 1, 1994 | | 2. Registered Agent and Office JOHN M SHEPHARD 620 COLLEGE AVE ST MARIES ID 83861 | | | | | | | | | | | | | | | | | | | | | |
|--|--|-------------------|--|--------------|-----------------------------------|------------------------|--|------------------------|-----|------------------------------------|------------------------|-------------------|-----------|--------------|--------------------------------|------------------------|-------------------|-----------|--------------|------------|--|--|--|--|
| Return To Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED | 1. Mailing Address — PROTEL, INC. JOHN M SHEPHARD PO BOX 292 ST MARIES ID 83861 | | 3. Incorporated Under The Laws of ID NO: 101065 | | | | | | | | | | | | | | | | | | | | | |
| 4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <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: <i>John M. Shephard</i></td> <td><i>HCO1 Box SR 325</i></td> <td><i>ST. MARIES</i></td> <td><i>ID</i></td> <td><i>83861</i></td> </tr> <tr> <td>Secretary: <i>Robert Krebs</i></td> <td><i>HCO1 Box SR 225</i></td> <td><i>ST. MARIES</i></td> <td><i>ID</i></td> <td><i>83861</i></td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> | | | | | Name | Street or P.O. Address | City | State | Zip | President: <i>John M. Shephard</i> | <i>HCO1 Box SR 325</i> | <i>ST. MARIES</i> | <i>ID</i> | <i>83861</i> | Secretary: <i>Robert Krebs</i> | <i>HCO1 Box SR 225</i> | <i>ST. MARIES</i> | <i>ID</i> | <i>83861</i> | Directors: | | | | |
| Name | Street or P.O. Address | City | State | Zip | | | | | | | | | | | | | | | | | | | | |
| President: <i>John M. Shephard</i> | <i>HCO1 Box SR 325</i> | <i>ST. MARIES</i> | <i>ID</i> | <i>83861</i> | | | | | | | | | | | | | | | | | | | | |
| Secretary: <i>Robert Krebs</i> | <i>HCO1 Box SR 225</i> | <i>ST. MARIES</i> | <i>ID</i> | <i>83861</i> | | | | | | | | | | | | | | | | | | | | |
| Directors: | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. Nature of Business <i>TELEMARKETING</i> | 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="1"> <tr> <td>Signature <i>John M. Shephard</i></td> <td>Date <i>7/19/94</i></td> </tr> <tr> <td>Name (Typed or Printed) <i>John Shephard</i></td> <td>Title <i>President</i></td> </tr> </table> | | | | Signature <i>John M. Shephard</i> | Date <i>7/19/94</i> | Name (Typed or Printed) <i>John Shephard</i> | Title <i>President</i> | | | | | | | | | | | | | | | | |
| Signature <i>John M. Shephard</i> | Date <i>7/19/94</i> | | | | | | | | | | | | | | | | | | | | | | | |
| Name (Typed or Printed) <i>John Shephard</i> | Title <i>President</i> | | | | | | | | | | | | | | | | | | | | | | | |