

INSTRUCTIONS ON REVERSE SIDE

ISSUED: 10-04-1990

No. 90818	Idaho Corporation Annual Report Form		2. Registered Agent and Office
REINSTATEMENT Return To		Due No Later Than November 1,	
Secretary of State Room 203, Statehouse Boise, ID 83720		1. Mailing Address — Please Correct	
RECEIVED C. OF STATE		OLSON FOOD, INC., NO. 1 BRIAN C. OLSON 11250 BELERIVE DRIVE	
** FINAL MODITE 7 AM NO FEE REQUIRED	97 JAN 7 9 05	IDAMO FALLS	ID 83401
3. Incorporated Under The Laws of ID NO: 090818			

4. Names and Addresses of Officers and Directors

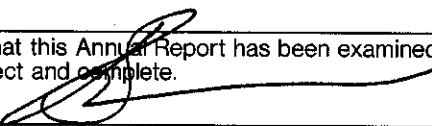
	Name	Street or P.O. Address	City	State	Zip
President:	Brian Olsen	11250 Belerive Dr.	Idaho falls	id	83401
Secretary:	William Olsen	" " "	" "	" "	" "
Directors:	Brian Olsen	" " "	" "	" "	" "

5. Nature of Business

Fast Food Restaurant

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)



Date 12/3/90
Title President