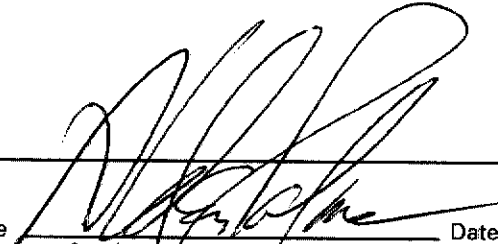


No. C 83644	Annual Report Form Due No Later Than November 30, 1997	2. Registered Agent and Office NOT A P.O. BOX ALDEN PALMER 917 MAIN BUHL ID 83316																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED ** FINAL NOTICE **	1. Mailing Address - Please Correct, If Not Correct GOKI CORPORATION ARDEN PALMER 917 MAIN BOX 169 BUHL ID 83316	3. Organized Under the Laws of: ID C 83644																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)																				
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>Alden L. Palmer</td> <td>917 MAIN #A</td> <td>BUHL</td> <td>ID</td> <td>83316</td> </tr> <tr> <td>SECR. TRES</td> <td>Joyce Palmer</td> <td>864 CYPRESS</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	PRESIDENT	Alden L. Palmer	917 MAIN #A	BUHL	ID	83316	SECR. TRES	Joyce Palmer	864 CYPRESS	TWIN FALLS	ID	83301
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ISSUED: 10-04-1997

↓ DO NOT TAPE OR STAPLE ↓

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