

INSTRUCTIONS ON REVERSE SIDE

No. 93504	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 ** FINAL NOTICE ** NO FEE REQUIRED	1. Mailing Address: Please Correct If Not Correct MESQUITE, INC. ROGER D CAMPBELL 1886 ADDISON AVE EAST TWIN FALLS ID 83301 0000	ROGER D CAMPBELL 1886 ADDISON AVE EAST TWIN FALLS ID 83301 3. Incorporated Under The Laws of ID NO: 093504																								
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th></th> <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:</td> <td>SUZAN CAMPBELL</td> <td>465 PARKWAY CIRCLE</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Secretary:</td> <td>ROGER CAMPBELL</td> <td>465 PARKWAY CIRCLE</td> <td>TWIN FALLS</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Name	Street or P.O. Address	City	State	Zip	President:	SUZAN CAMPBELL	465 PARKWAY CIRCLE	TWIN FALLS	ID	83301	Secretary:	ROGER CAMPBELL	465 PARKWAY CIRCLE	TWIN FALLS	ID	83301	Directors:					
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5. Nature of Business <i>Food - Beverage</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. Signature: <i>Suzan Campbell</i> Name (Typed): <i>SUZAN CAMPBELL</i> Date: <i>10-27-91</i> Title: <i>Pres.</i>																									