No. C 40472	Annual Report Form 1999  Due No Later Than November 30,		2. Registered Agent a	2. Registered Agent and Office NOT A P.O. BOX		
OROHE CARLE	Mailing Address - Please Correct, If Not Correct  FLYING TRIANGLE, INC.  W.N. BRAILSFORD  P. 0. BOX 180			W. N. BRAILSFORD 18274 Highway 30		
PO BOX 83720 BOISE, ID 83720-0080			HAGERMAN	ID	83332	
NO FEE REQUIRED			3. Organized Under t	he Laws of:		
	HAGERMAN	ID 83332	10	C 4(	0472	
Corporations: Enter Names and Busi Limited Liability Companies: Enter N	ness Addresses of P ames and Addresses		ers (check one)			
Office held Name		reet or P.O. Address	City	<u>State</u>	Zip	
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Signature of New Registered Age	ent 6.					
		re Count Brough	Date	کس <u>ح اله ۱</u> ۰	999	
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