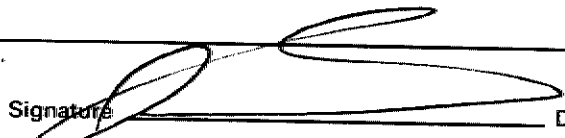
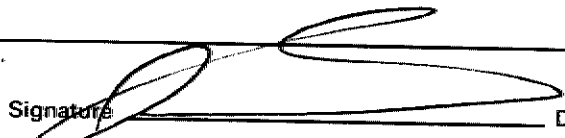
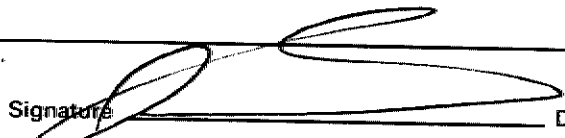


No. C 92001	Annual Report Form Due No Later Than November 30, 1997		2. Registered Agent and Office NOT A P.O. BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct ENZO, INC. M.R. MICKELSON 560 MEMORIAL DR POCATELLO ID 83201		M.R. MICKELSON 460 E. OAK POCATELLO ID 83201 3. Organized Under the Laws of: ID C 92001													
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input checked="" type="checkbox"/> Members (check one) <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Pres</td> <td>M.R. MICKELSON</td> <td>560 MEMORIAL DR.</td> <td>Pocatello</td> <td>ID</td> <td>83201</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Pres	M.R. MICKELSON	560 MEMORIAL DR.	Pocatello	ID	83201
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Pres	M.R. MICKELSON	560 MEMORIAL DR.	Pocatello	ID	83201											
5.	6. <table border="0"> <tr> <td>Signature</td> <td>Date</td> </tr> <tr> <td></td> <td>10/8/97</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Title</td> </tr> <tr> <td>M. R. Mickelson</td> <td>Pres</td> </tr> </table>				Signature	Date		10/8/97	Name (Typed or Printed)	Title	M. R. Mickelson	Pres				
Signature	Date															
	10/8/97															
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M. R. Mickelson	Pres															

ISSUED: 07-04-1997

↓ DO NOT TAPE OR STAPLE ↓

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