

July 21, 1994

EXPRESS RESTAURANT EQUIPMENT  
ROBERT BOYD  
9830 W MEADOWLARK CT  
BOISE ID 83704

RE: EXPRESS RESTAURANT EQUIPMENT...File Number C 103848

Dear Mr. Boyd:

Please find enclosed your recently submitted annual report for the 1994-1995 fiscal year. We are unable to accept it in its present form. Please make the following correction(s) and return to this office.

We noted the address of the registered agent had been crossed off in block 2 and the correction is missing. Pursuant to section 30-1-12, Idaho Code, each Idaho corporation must have and continuously maintain a registered agent in this state. Please make the correction and resubmit the form to this office before December 1, 1994 to avoid forfeiture.

Please print the addresses in block 4.

If you have any questions or need further assistance, please do not hesitate to contact this office at (208) 334-2301.

Very truly yours,

Tonya Herold  
Corporate Division

Enclosures: cited

ISSUED: 07-05-1994

No. 103348	Idaho Corporation Annual Report Form		2. Registered Agent and Office																									
Return To  <b>Secretary of State</b> <b>Room 203, Statehouse</b> <b>P.O. BOX 83720</b> <b>Boise, ID 83720-0080</b> * FIRST NOTICE * NO FEE REQUIRED	Due No Later Than November 1, 1994		ROBERT T BOYD <del>2030 SCIO TO</del>																									
	1. Mailing Address — EXPRESS RESTAURANT EQUIPMENT SE ROBERT T BOYD <del>2030 SCIO TO</del> MERIDIAN EXPRESS Restaurant Equipment Service 9830 W. Meadowlark Ct. Boise, ID 83704 ID <del>83642</del>		MERIDIAN ID <del>83642</del>  3. Incorporated Under The Laws of ID NO: 103848																									
4. Names and Addresses of Officers and Directors																												
<table border="0"> <thead> <tr> <th></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>President:</td> <td>Robert T. Boyd</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Secretary:</td> <td>TAMARA S. Boyd</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	Robert T. Boyd					Secretary:	TAMARA S. Boyd					Directors:					
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Secretary:	TAMARA S. Boyd																											
Directors:																												
5. Nature of Business Lease/Service Restaurant equipment		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 <u>Robert T Boyd</u> Date <u>7/12/94</u> Name (Typed or Printed) _____ Title <u>Pres</u>																										