

No. 64747 Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991 1 Mailing Address: <i>Please Correct If Not Correct</i> ROBERT A. NORMAN, C.P.A. / P ROBERT NORMAN P. O. BOX 394 TWIN FALLS ID 83303	2. Registered Agent and Office NOT A P.O. BOX ROBERT NORMAN 155 2ND AVENUE NORTH TWIN FALLS ID 83703 3. Incorporated Under The Laws of ID NO: 064747																								
4. Names and Addresses of Officers and Directors <table border="1"> <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 A. Norman</td> <td>PO Box 394</td> <td>Twin Falls</td> <td>ID</td> <td>83303</td> </tr> <tr> <td>Secretary:</td> <td>Rita Schumacher</td> <td>PO Box 394</td> <td>Twin Falls</td> <td>ID</td> <td>83303</td> </tr> <tr> <td>Directors:</td> <td>Robert A. Norman</td> <td>P.O. Box 394</td> <td>Twin Falls</td> <td>ID</td> <td>83303</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 A. Norman	PO Box 394	Twin Falls	ID	83303	Secretary:	Rita Schumacher	PO Box 394	Twin Falls	ID	83303	Directors:	Robert A. Norman	P.O. Box 394	Twin Falls	ID	83303
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5. Nature of Business CPA	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="1"> <tr> <td>Signature</td> <td>Robert A. Norman</td> <td>Date</td> <td>7-8-91</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Robert A. Norman</td> <td>Title</td> <td>Pres</td> </tr> </table>		Signature	Robert A. Norman	Date	7-8-91	Name (Typed or Printed)	Robert A. Norman	Title	Pres																
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