		INSTRUC	TIONS ON REVERSE SIDE	termen. A7.	-01-105		
No. 42753 Idah		Idaho Corpora	tion Annual Report Form	2. Registered Agent and	d Office' NO	TA P.O. BOX	
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE *		Due No Later Than November 1, 1. Mailing Address — Plance Correct II Not Correct			CALVIN W. POWELL 1802 CURTIS AVENUE		
				1802 CURTIS			
		BONNEVILLE BLUEPRINT SUPPLY, IN CALVIN POWELL 1802 CURTIS AVENUE					
				3. Incorporated Under The Laws			
NO FEE RE		IDAHO FALLS	ID 83402	NO: 42753			
4. Names and Add	resses of Officer	s and Directors	MUST BE PRINTED	OR TYPED			
		<u>Name</u>	Street or P.O. Address	<u>City</u>	State	<u>Zip</u>	
President: Secretary:	Calvin W Jim Oste		1802 Curtis Avenue	Idaho Falls,	ID 8	3402-4499	
Directors:	Calvin W		ri e	TI .	11	O.	
Jim Oste			O	11	H	41	
	Chad Kev	in Powell	Iŧ	н	11	ŧI	
5. Nature of Busine	-	6. I certify the true, corre	at this Annual Report has been exc	amined by me and is to the	best of my k	knowledge	
Retai	1 Sales	Signature	at met	tresles Date	Date 10/7/93		
		Name Printed	Calvin W. Powell	Title Pre	Title President		

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