

97323

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No. Return To Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE * NO FEE REQUIRED	Idaho Corporation Annual Report Form Due No Later Than November 1, 1992 1. Mailing Address — Please Correct, If Not Correct ORGANIZED PRODUCTS & SERVICES, RAYMOND G BARTKOWIAK PO BOX 4531 43143 RIVERVIEW DR. KINGSTON ID 83839-9701 DR. COEUR D'ALENE ID 83814 0000	2. Registered Agent and Office NOT A P.O. BOX RAYMOND G BARTKOWIAK HERI BOX 428 43143 RIVERVIEW DRIVE MEDIMONT ID 83842 KINGSTON, ID 83839-9701 3. Incorporated Under The Laws of NO: 97323																				
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President: DAVID BARTKOWIAK</td> <td>HERI BOX 1A</td> <td>MEDIMONT</td> <td>ID</td> <td>83842</td> </tr> <tr> <td>Secretary: RAYMOND BARTKOWIAK</td> <td>PO BOX 4531 43143 RIVERVIEW DRIVE</td> <td>KINGSTON</td> <td>ID</td> <td>83839</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Name	Street or P.O. Address	City	State	Zip	President: DAVID BARTKOWIAK	HERI BOX 1A	MEDIMONT	ID	83842	Secretary: RAYMOND BARTKOWIAK	PO BOX 4531 43143 RIVERVIEW DRIVE	KINGSTON	ID	83839	Directors:				
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5. Nature of Business MANUFACTURING	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 RAYMOND BARTKOWIAK</td> <td>Date 7-17-92</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Title DIRECTOR OF OPERATIONS</td> </tr> </table>		Signature RAYMOND BARTKOWIAK	Date 7-17-92	Name (Typed or Printed)	Title DIRECTOR OF OPERATIONS																
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