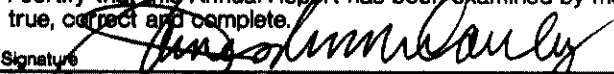
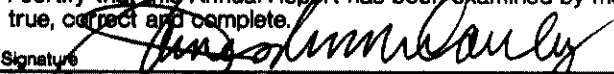
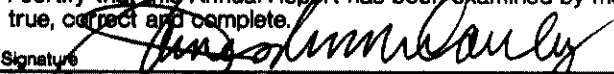


| No. 80315 | Idaho Corporation Annual Report Form Due No Later Than November 1, 1991 | | 2. Registered Agent and Office NOT A P.O. BOX | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|-------|-----------|------|---|---------|-------------------------|-------|-------------------|-------------------|-------------------|-------|-----|-------|------------|-----------------|--|--|--|--|------------|--|--|--|--|--|
| Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED | 1. Mailing Address: Please Correct, If Not Correct | | JAMES RALPH MCCAULEY 1345 E. STATE ST. EAGLE ID 83616 | | | | | | | | | | | | | | | | | | | | | | | | | |
| | NORTHWEST PRODUCTS, INC. JAMES RALPH MCCAULEY 1345 E. STATE ST. EAGLE ID 83616 | | 3. Incorporated Under The Laws of ID NO: 080315 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. Names and Addresses of Officers and Directors | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th></th> <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:</td> <td>JAMES R. MCCAULEY</td> <td>1345 E. STATE ST.</td> <td>EAGLE</td> <td>ID.</td> <td>83616</td> </tr> <tr> <td>Secretary:</td> <td>ARLENE MCCAULEY</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> | | | | | | Name | Street or P.O. Address | City | State | Zip | President: | JAMES R. MCCAULEY | 1345 E. STATE ST. | EAGLE | ID. | 83616 | Secretary: | ARLENE MCCAULEY | | | | | Directors: | | | | | |
| | Name | Street or P.O. Address | City | State | Zip | | | | | | | | | | | | | | | | | | | | | | | |
| President: | JAMES R. MCCAULEY | 1345 E. STATE ST. | EAGLE | ID. | 83616 | | | | | | | | | | | | | | | | | | | | | | | |
| Secretary: | ARLENE MCCAULEY | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Directors: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. Nature of Business FOODSERVICE BROKER | | 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>Date</td> </tr> <tr> <td>  JAMES R. MCCAULEY </td> <td>8/14/91</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Title</td> </tr> <tr> <td>JAMES R. MCCAULEY</td> <td>PRESIDENT</td> </tr> </table> | | | Signature | Date |  JAMES R. MCCAULEY | 8/14/91 | Name (Typed or Printed) | Title | JAMES R. MCCAULEY | PRESIDENT | | | | | | | | | | | | | | | | |
| Signature | Date | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  JAMES R. MCCAULEY | 8/14/91 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name (Typed or Printed) | Title | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| JAMES R. MCCAULEY | PRESIDENT | | | | | | | | | | | | | | | | | | | | | | | | | | | |