

INSTRUCTIONS ON REVERSE SIDE

No. 82451	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: <i>Please Correct If Not Correct</i>		GEORGE WEHMANN 444 0 STREET IDAHO FALLS ID 83402																									
	WEHMANN AND ASSOCIATES, INC GEORGE WEHMANN P.O. BOX 50539 IDAHO FALLS ID 83405		3. Incorporated Under The Laws of ID NO: 062451																									
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><i>George Wehmann</i></td> <td><i>PO 50539</i></td> <td><i>Idaho Falls</i></td> <td><i>ID</i></td> <td><i>83405 053</i></td> </tr> <tr> <td>Secretary:</td> <td><i>Lola June Wehmann</i></td> <td><i>"</i></td> <td><i>"</i></td> <td><i>"</i></td> <td><i>"</i></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:	<i>George Wehmann</i>	<i>PO 50539</i>	<i>Idaho Falls</i>	<i>ID</i>	<i>83405 053</i>	Secretary:	<i>Lola June Wehmann</i>	<i>"</i>	<i>"</i>	<i>"</i>	<i>"</i>	Directors:					
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Directors:																												
5. Nature of Business <i>Consulting</i>		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 <i>George Wehmann</i></td> <td>Date <i>7/8</i></td> </tr> <tr> <td>Name (Typed or Printed) <i>George Wehmann</i></td> <td>Title <i>President</i></td> </tr> </table>			Signature <i>George Wehmann</i>	Date <i>7/8</i>	Name (Typed or Printed) <i>George Wehmann</i>	Title <i>President</i>																				
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