

INSTRUCTIONS ON REVERSE SIDE

No. 40509	Idaho Corporation Annual Report Form Due No Later Than November 1, 1993		2. Registered Agent and Office NOT A P.O. BOX JAMES F. WALLACE 1101 SHOSHONE BOISE ID 83705																					
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address ASSOCIATED DISTRIBUTING AND LEA JAMES WALLACE PO BOX 7086 BOISE ID 83707		3. Incorporated Under The Laws of ID NO: 40509																					
4. Names and Addresses of Officers and Directors MUST BE PRINTED OR TYPED <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: James F. Wallace</td> <td>1101 Shoshone</td> <td>Boise, Idaho</td> <td>83705</td> <td></td> </tr> <tr> <td>Secretary: Anne M. Wallace</td> <td>1101 Shoshone</td> <td>Boise, Idaho</td> <td>83705</td> <td></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: James F. Wallace	1101 Shoshone	Boise, Idaho	83705		Secretary: Anne M. Wallace	1101 Shoshone	Boise, Idaho	83705		Directors:				
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5. Nature of Business Wholesale	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>Name (Typed or Printed) James F. Wallace</td> <td>July 9, 1993</td> </tr> <tr> <td></td> <td>Title President</td> </tr> </table>				Signature	Date	Name (Typed or Printed) James F. Wallace	July 9, 1993		Title President														
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