

No. C 82815	Annual Report Form Due No Later Than November 30, 1995		2. Registered Agent and Office NOT A P.O. BOX																																
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct. If Not Correct BUDGET SIGNS PLUS, INC. BONNIE SALA 1621 N ORCHARD		BONNIE L SALA 1621 N ORCHARD BOISE ID 83726																																
	3. Organized Under the Laws of:		ID C 82815																																
	* FIRST NOTICE * BOISE ID 83726																																		
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)																																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Office held</th> <th style="width: 20%;">Name</th> <th style="width: 30%;">Street or P.O. Address</th> <th style="width: 15%;">City</th> <th style="width: 15%;">State</th> <th style="width: 15%;">Zip</th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>BONNIE L. SALA</td> <td>6877 W. SUSAN LANE #101</td> <td>BOISE</td> <td>IDAHO</td> <td>83704</td> </tr> <tr> <td>VICE PRES.</td> <td>TERRI L. MAYER</td> <td>6950 W. SUSAN LANE #101</td> <td>BOISE</td> <td>IDAHO</td> <td>83704</td> </tr> <tr> <td>SEC./TREAS.</td> <td>AMBER L. AGGSON</td> <td>1060 CAMELOT DRIVE</td> <td>BOISE</td> <td>IDAHO</td> <td>83704</td> </tr> <tr> <td>DIRECTOR</td> <td>SCOTT A. MAYER</td> <td>6950 W. SUSAN LANE #101</td> <td>BOISE</td> <td>IDAHO</td> <td>83704</td> </tr> </tbody> </table>						Office held	Name	Street or P.O. Address	City	State	Zip	PRESIDENT	BONNIE L. SALA	6877 W. SUSAN LANE #101	BOISE	IDAHO	83704	VICE PRES.	TERRI L. MAYER	6950 W. SUSAN LANE #101	BOISE	IDAHO	83704	SEC./TREAS.	AMBER L. AGGSON	1060 CAMELOT DRIVE	BOISE	IDAHO	83704	DIRECTOR	SCOTT A. MAYER	6950 W. SUSAN LANE #101	BOISE	IDAHO	83704
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5. NATURE OF BUSINESS SIGN 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. Signature <u>Bonnie L. Sala</u> Date <u>9-18-96</u> Name (Typed or Printed) <u>BONNIE L. SALA</u> Title <u>PRESIDENT</u>																																	

ISSUED: 07-06-1995

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