

No. <b>C104212</b>	<b>Annual Report Form</b> Due No Later Than November 30, <b>1999</b>		2. Registered Agent and Office <b>NOT A P.O. BOX</b>  <b>ALBERT L O'RYAN III</b> <b>1731 MICHAEL STREET</b>  <b>IDAHO FALLS ID 83402</b>
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>  <b>* FIRST NOTICE *</b>	1. Mailing Address - Please Correct. If Not Correct  <b>LEO'S PLACE, INC.</b> <b>ALBERT L O'RYAN III</b> <b>1731 MICHAEL STREET</b>  <b>IDAHO FALLS ID 83402</b>		3. Organized Under the Laws of:  <b>ID C104212</b>
4. Corporations: Enter Names and Business Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)			
<u>Office held</u>  <i>Pres,</i> <i>V.P Pres</i>  <i>Sec</i> <i>Treas</i>	<u>Name</u>  <i>Albert L O'Ryan</i> <i>Albert L O'Ryan</i> <i>Chasen M O'Ryan</i> <i>Chasen M O'Ryan</i>	<u>Street or P.O. Address</u>  <i>1731 Michael St</i>  <i>11 11</i>	<u>City</u>  <i>Idaho Falls</i>  <i>Idaho Falls</i>
			<u>State</u>  <b>ID</b>  <b>ID</b>
			<u>Zip</u>  <i>83402</i>  <i>83402</i>
5. Signature of New Registered Agent		6. Signature <u><i>ALCOZ</i></u> Date <u><b>8-11-99</b></u> Name <small>(Typed or Printed)</small> <u><i>Albert L O'Ryan</i></u> Title <u><i>owner</i></u>	

ISSUED: 07-03-1999

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