

INSTRUCTIONS ON REVERSE SIDE

ISSUED: 10/7/91 1000

No. 46974		Idaho Corporation Annual Report Form Due No Later Than November 1, 1993		2. Registered Agent and Office NOT A P.O. BOX	
Return To Secretary of State Room 203, Statehouse Boise, ID 83720		1 Mailing Address: WESTERN LABORATORIES, INC. JOHN P. TABERNA P.O. BOX 400		JOHN P. TABERNA HIWAY 95A WEST OF CITY	
* FIRST NOTICE * NO FEE REQUIRED		PARMA ID 83660		PARMA ID 83660	
4. Names and Addresses of Officers and Directors		MUST BE PRINTED OR TYPED			
President: JOHN P TABERNA		Name	Street or P.O. Address	City	State Zip
Secretary:			P.O. BOX 1020	PARMA	ID 83660
Directors:					
5. Nature of Business SOIL TESTING LAB		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 <input checked="" type="checkbox"/>	John P. Taberna	Date 8/5/93	
		Name <small>(Typed or Printed)</small>	JOHN P TABERNA	Title <i>Taberna</i>	