

INSTRUCTIONS ON REVERSE SIDE

1330001 01-04-1993

No. 52649	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX DEAN CONDIE <i>ELDEN CONDIE</i> 506 6TH STREET <i>4711 INVERNESS</i>
Return To	Due No Later Than November 30, 1995	
Secretary of State 700 W. Jefferson P.O. Box 83720 Boise, ID 83720-0880 * FIRST NOTICE * NO FEE REQUIRED	Mailing Address - Please Correct if Not Correct SCINIS & CONDIE, CHARTERED ELDEN R. CONDIE 226 SADDLE CT. <i>4711 INVERNESS DR</i> FOLSOM CA 95630 <i>Post FALLS ID 83854</i>	RUPERT ID 83350 <i>Post FALLS ID 83854</i> 3. Incorporated Under The Laws of ID NO: 52649

4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Postal Code
President:	<i>ELDEN CONDIE</i>	<i>4711 INVERNESS DR</i>	<i>Post FALLS</i>	<i>ID</i>	<i>83854</i>
Secretary:	<i>ELDEN CONDIE</i>	<i>4711 INVERNESS DR</i>	<i>Post FALLS</i>	<i>ID</i>	<i>83854</i>
Directors:					

5. Nature of Business

Accounting

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

Name

(Typed or Printed)

Elden Condie
ELDEN CONDIE

Date

Title

10-17-95
Pres.