

ISSUED: 07-05-1994

| No. 78179                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>Idaho Corporation Annual Report Form</b>                                                                                                                                                                                                                           |                                                                            | 2. Registered Agent and Office  |       |           |      |                         |       |       |     |            |                |                    |       |       |       |            |  |  |  |  |  |            |  |  |  |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|---------------------------------|-------|-----------|------|-------------------------|-------|-------|-----|------------|----------------|--------------------|-------|-------|-------|------------|--|--|--|--|--|------------|--|--|--|--|--|
| Return To<br><br><b>Secretary of State</b><br><b>Room 203, Statehouse</b><br><b>P.O. BOX 83720</b><br><b>Boise, ID 83720-0080</b><br><br>* FIRST NOTICE *<br>NO FEE REQUIRED                                                                                                                                                                                                                                                                                                                                                                                  | Due No Later Than November 1, 1994                                                                                                                                                                                                                                    |                                                                            | JERRY L. CAVEN<br>6874 FAIRVIEW |       |           |      |                         |       |       |     |            |                |                    |       |       |       |            |  |  |  |  |  |            |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 1. Mailing Address —<br><br>ROYAL FORK OF ALASKA, INC.<br>JERRY L. CAVEN<br>6874 FAIRVIEW<br><br>BOISE ID 83704                                                                                                                                                       | BOISE ID 83704<br><br>3. Incorporated Under The Laws<br>of ID<br>NO: 78179 |                                 |       |           |      |                         |       |       |     |            |                |                    |       |       |       |            |  |  |  |  |  |            |  |  |  |  |  |
| 4. Names and Addresses of Officers and Directors <b>MUST BE PRINTED OR TYPED</b> <table border="1"> <thead> <tr> <th></th> <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:</td> <td>Jerry L. Caven</td> <td>6874 Fairview Ave.</td> <td>Boise</td> <td>Idaho</td> <td>83704</td> </tr> <tr> <td>Secretary:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> |                                                                                                                                                                                                                                                                       |                                                                            |                                 |       |           | Name | Street or P.O. Address  | City  | State | Zip | President: | Jerry L. Caven | 6874 Fairview Ave. | Boise | Idaho | 83704 | Secretary: |  |  |  |  |  | Directors: |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Name                                                                                                                                                                                                                                                                  | Street or P.O. Address                                                     | City                            | State | Zip       |      |                         |       |       |     |            |                |                    |       |       |       |            |  |  |  |  |  |            |  |  |  |  |  |
| President:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Jerry L. Caven                                                                                                                                                                                                                                                        | 6874 Fairview Ave.                                                         | Boise                           | Idaho | 83704     |      |                         |       |       |     |            |                |                    |       |       |       |            |  |  |  |  |  |            |  |  |  |  |  |
| Secretary:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                       |                                                                            |                                 |       |           |      |                         |       |       |     |            |                |                    |       |       |       |            |  |  |  |  |  |            |  |  |  |  |  |
| Directors:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                       |                                                                            |                                 |       |           |      |                         |       |       |     |            |                |                    |       |       |       |            |  |  |  |  |  |            |  |  |  |  |  |
| 5. Nature of Business<br><br><b>Restaurant</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.<br><br><table border="1"> <tr> <td>Signature</td> <td>Date</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Title</td> </tr> </table> |                                                                            |                                 |       | Signature | Date | Name (Typed or Printed) | Title |       |     |            |                |                    |       |       |       |            |  |  |  |  |  |            |  |  |  |  |  |
| Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Date                                                                                                                                                                                                                                                                  |                                                                            |                                 |       |           |      |                         |       |       |     |            |                |                    |       |       |       |            |  |  |  |  |  |            |  |  |  |  |  |
| Name (Typed or Printed)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Title                                                                                                                                                                                                                                                                 |                                                                            |                                 |       |           |      |                         |       |       |     |            |                |                    |       |       |       |            |  |  |  |  |  |            |  |  |  |  |  |