

No. C113490	Annual Report Form Due No Later Than November 30, 1996		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 SMITTY'S WHOLESALE NEON INC. TRAVIS W SMITH 1901 W SELTICE WAY #88		TRAVIS W SMITH 1901 W SELTICE WAY #88 POST FALLS ID 83854 3. Organized Under the Laws of: ID C113490																			
* FIRST NOTICE * POST FALLS ID 83854																						
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" data-bbox="51 352 1495 490"> <thead> <tr> <th>Office held</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>Travis W. Smith</td> <td>1901 W. Seltice #88</td> <td>Post Falls</td> <td>ID</td> <td>83854</td> </tr> <tr> <td>Vice Pres.</td> <td>Tina K. Smith</td> <td>Same</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	President	Travis W. Smith	1901 W. Seltice #88	Post Falls	ID	83854	Vice Pres.	Tina K. Smith	Same			
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Vice Pres.	Tina K. Smith	Same																				
5. NATURE OF BUSINESS Wholesale ANY LAWFUL Neon Producer (Signs)		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>Travis Smith</u> Date <u>7/16/96</u> Name (Typed or Printed) <u>Travis Smith</u> Title <u>President</u>																				

ISSUED: 07-06-1996

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