

No. 49652	Idaho Corporation Annual Report Form Due No Later Than November, 1, 1992		2. Registered Agent and Office NOT A P.O. BOX GARY M. JENKINS 705 TERRACE DRIVE IDAHO FALLS ID 83401																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720	1. Mailing Address — Please Correct, If Not Correct		3. Incorporated Under The Laws of ID NO: 49652																									
	JENKINS GLASS, INC. GARY M. JENKINS P.O. BOX 2015 IDAHO FALLS ID 83403 0000																											
4. Names and Addresses of Officers and Directors																												
<table border="1"> <thead> <tr> <th></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td><i>Gary M. Jenkins</i></td> <td><i>705 Terrace Dr</i></td> <td><i>Idaho Falls</i></td> <td><i>Idaho</i></td> <td><i>83402</i></td> </tr> <tr> <td>Secretary:</td> <td><i>Brian Lunde</i></td> <td><i>930 Stevens</i></td> <td><i>Idaho Falls</i></td> <td><i>Idaho</i></td> <td><i>83</i></td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	<i>Gary M. Jenkins</i>	<i>705 Terrace Dr</i>	<i>Idaho Falls</i>	<i>Idaho</i>	<i>83402</i>	Secretary:	<i>Brian Lunde</i>	<i>930 Stevens</i>	<i>Idaho Falls</i>	<i>Idaho</i>	<i>83</i>	Directors:					
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5. Nature of Business Construction		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><i>Gary M. Jenkins</i></u> Date <u><i>11-1-92</i></u> Name (Typed or Printed) <u><i>Gary M. Jenkins</i></u> Title <u><i>Pres</i></u>																										