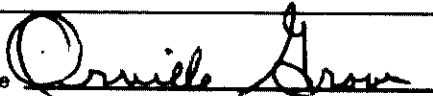


No. C 53326	Annual Report Form Due No Later Than November 30, 1997		2 Registered Agent and Office NOT A P.O. BOX		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1 Mailing Address Please Correct, If Not Correct		ORVILLE M. GROVES ROUTE 2		
	4 G'S, INC. ORVILLE M. GROVES 29416 U OF I LANE		PARMA ID 83660		
* FIRST NOTICE *		PARMA ID 83660		ID C 53326	
4. Corporations: Enter Names and Business 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)					
Office held	Name	Street or P.O. Address	City	State	Zip
PRESIDENT	ORVILLE GROVES	29416 U.O.F.I.LN.	PARMA	IDaho	83660
SECRETARY	FERN GROVES	" "	" "	" "	" "
DIRECTORS	ORVILLE AND FERN GROVES	" "	" "	" "	" "
5.		6. Signature <u></u> Date <u>7-28-97</u> Name (Typed or Printed) <u>ORVILLE GROVES</u> Title <u>PRESIDENT</u>			

ISSUED: 07-04-1997 ↓ DO NOT TAPE OR STAPLE ↓

16591