

No. <b>61324</b>	<b>Idaho Corporation Annual Report Form</b> Due No Later Than November 1, 1990	2. Registered Agent and Office
Return To  <b>Secretary of State</b> <b>Room 203, Statehouse</b> <b>Boise, ID 83720</b>  <b>NO FEE REQUIRED</b>		1. Mailing Address — Please Correct
	<b>AMERIND INCORPORATED</b> <b>SONIA ELLEN SPRABEARY</b> <b>P.O. BOX 146</b>  <b>SHELLEY ID 83274</b>	3. Incorporated Under The Laws of <b>ID</b>  <b>NO: 061324</b>

## 4. Names and Addresses of Officers and Directors

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	<b>SONIA SPRABEARY</b>	<b>PO Box 146</b>	<b>shelley</b>	<b>ID.</b>	<b>83274</b>
Secretary:	<b>SHERI CHRISTENSEN</b>	<b>PO Box 144</b>	<b>shelley</b>	<b>ID.</b>	<b>83274</b>
Directors:	—	—			

## 5. Nature of Business

*wholesale Supplier*

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)

*Sonia Sprabeary*  
**SONIA SPRABEARY**

Date

*8-14-90*

Title

*President*