

INSTRUCTIONS ON REVERSE SIDE

ISSUED: 07-05-1994

No. 40108	Idaho Corporation Annual Report Form <i>Due No Later Than November 1, 1994</i>	2. Registered Agent and Office NOT A P.O. BOX
Return To Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address — <i>(Please Complete If Not Current)</i> MASONS, INC. ELLEN D. MASON 2070 WEST BROADWAY IDAHO FALLS ID 83402	JAMES MASON 2070 W. BROADWAY IDAHO FALLS ID 83402 3. Incorporated Under The Laws of ID NO: 40108

4. Names and Addresses of Officers and Directors		MUST BE PRINTED OR TYPED									
President: <i>James Mason</i> Secretary: <i>Ellen Mason</i> Directors:	<table border="0"> <thead> <tr> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td></td> <td>2070 W.</td> <td>IDAHO FALLS</td> <td>ID</td> <td>83402</td> </tr> </tbody> </table>	Name	Street or P.O. Address	City	State	Zip		2070 W.	IDAHO FALLS	ID	83402
Name	Street or P.O. Address	City	State	Zip							
	2070 W.	IDAHO FALLS	ID	83402							
5. Nature of Business <i>Home Improvement</i>	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="0"> <tr> <td>Signature <i>Ellen D. Mason</i></td> <td>Date <i>8-22-94</i></td> </tr> <tr> <td>Name <small>(Typed or Printed)</small></td> <td>Title</td> </tr> </table>			Signature <i>Ellen D. Mason</i>	Date <i>8-22-94</i>	Name <small>(Typed or Printed)</small>	Title				
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