

No. <b>031940</b>	<b>Idaho Corporation Annual Report Form</b>		2. Registered Agent and Office																					
Return To	Due No Later Than November 1, 1988		<i>DAVID W. KLAMPER</i>																					
Secretary of State Room 203, Statehouse Boise, ID 83720	1. Mailing Address — Please Correct <b>031940</b>		<del>ARNOLD H. KIMBLE</del>																					
SEC. OF STATE	K-K DISTRIBUTORS, INC.		517 SNAKE RIVER AVENUE																					
88 JUL 18 PM 3 02	ARNOLD H. KIMBLE		LEWISTON, IDAHO																					
	517 SNAKE RIVER AVENUE		83501																					
	LEWISTON, IDAHO		ENTERED																					
	83501		JUL 28 1988																					
3. Incorporated Under The Laws of																								
STATE OF IDAHO																								
4. Names and Addresses of Officers and Directors																								
<table border="1"> <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>President: <i>DAVID W. KLAMPER</i></td> <td><i>2129 2ND</i></td> <td><i>LEWISTON</i></td> <td><i>ID</i></td> <td><i>83501</i></td> </tr> <tr> <td>Secretary: <i>DEBRA J. KLAMPER</i></td> <td><i>"</i></td> <td><i>"</i></td> <td><i>"</i></td> <td><i>"</i></td> </tr> <tr> <td>Directors: <i>SAME</i></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					Name	Street or P.O. Address	City	State	Zip	President: <i>DAVID W. KLAMPER</i>	<i>2129 2ND</i>	<i>LEWISTON</i>	<i>ID</i>	<i>83501</i>	Secretary: <i>DEBRA J. KLAMPER</i>	<i>"</i>	<i>"</i>	<i>"</i>	<i>"</i>	Directors: <i>SAME</i>				
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Directors: <i>SAME</i>																								
5. Nature of Business <i>Wholesale</i> <i>Beer &amp; Wine Distribution</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.																						