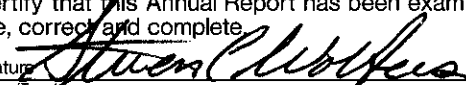
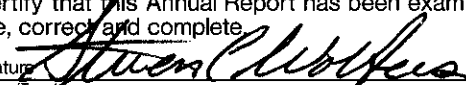
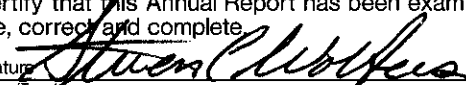


No. 85837	Idaho Corporation Annual Report Form <i>Due No Later Than November 1, 1990</i>		2. Registered Agent and Office CONNIE WOLTERS ROUTE 2 KIMBERLY ID 83341 30																								
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	1. Mailing Address — Please Correct FOXY 32, INC. CONNIE WOLTERS ROUTE 2 KIMBERLY ID 83341		3. Incorporated Under The Laws of ID NO: 085837																								
	4. Names and Addresses of Officers and Directors <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 30%; text-align: center;"><u>Name</u></th> <th style="width: 30%; text-align: center;"><u>Street or P.O. Address</u></th> <th style="width: 15%; text-align: center;"><u>City</u></th> <th style="width: 10%; text-align: center;"><u>State</u></th> <th style="width: 10%; text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Steve Walters</td> <td>Route 2</td> <td>Kimberly</td> <td>Idaho</td> <td>83341</td> </tr> <tr> <td>Secretary:</td> <td>Connie Walters</td> <td>Route 2</td> <td>Kimberly</td> <td>Idaho</td> <td>83341</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:	Steve Walters	Route 2	Kimberly	Idaho	83341	Secretary:	Connie Walters	Route 2	Kimberly	Idaho	83341	Directors:				
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Directors:																											
5. Nature of Business Trucking Company	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 style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature  <small>(Typed or Printed)</small> Name </td> <td style="width: 40%;"> Date 10-19-90 Title Pres. </td> </tr> </table>				Signature  <small>(Typed or Printed)</small> Name	Date 10-19-90 Title Pres.																					
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