

INSTRUCTIONS ON REVERSE SIDE

No. 80025	Idaho Corporation Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX ROBERTA KARPACH																					
Return To	Due No Later Than November 30, 1995		190 E. STATE, PO BOX 562																					
Secretary of State 700 W Jefferson P.O. Box 83720	1. Mailing Address -- Please Correct If Not Correct SACCHOS CORPORATION (THE) ROBERTA KARPACH P. O. BOX 562		EAGLE ID 83616																					
* Boise ID 83720-0100 * NO FEE REQUIRED	EAGLE ID 83616		3. Incorporated Under The Laws of ID NO: 80025																					
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>Postal Code</th> </tr> </thead> <tbody> <tr> <td>President: ROBERTA KARPACH</td> <td>P.O. BOX 562</td> <td>EAGLE</td> <td>ID</td> <td>83616</td> </tr> <tr> <td>Secretary: "</td> <td>"</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					Name	Street or P.O. Address	City	State	Postal Code	President: ROBERTA KARPACH	P.O. BOX 562	EAGLE	ID	83616	Secretary: "	"				Directors:				
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President: ROBERTA KARPACH	P.O. BOX 562	EAGLE	ID	83616																				
Secretary: "	"																							
Directors:																								
5. Nature of Business Bar	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 <u>ROBERTA KARPACH</u> Date <u>7-25-95</u> Name (Typed or Printed) <u>ROBERTA KARPACH</u> Title <u>Owner-Operator</u>																							