July 14, 1995

IMAGE NORTHWEST, INC. CHERYL MCFARLAND 2014 S 314TH FEDERAL WAY WA 98003

RE: IMAGE NORTHWEST, INC. File Number C 102726

Dear Ms. Mcfarland:

Please find enclosed your recently submitted annual report for the 1994-1995 fiscal year. We are unable to accept it in its present form. Please make the following correction(s) and return to this office.

You have stated that the corporation is not doing business in Idaho. The records of this office, however, do not indicate that the corporation has filed an application for withdrawal from this state.

Enclosed please find an application for withdrawal. This office requires the application in duplicate and fees of \$20.00 to effect the withdrawal.

If instead you wish to just allow the corporation to forfeit its right to do business in Idaho, then please disregard any subsequent annual report forms which you may receive. If an application for withdrawal or annual report is not filed before December 1, 1995, the corporation will forfeit its right to do business on that date.

If you have any questions or need further assistance, please do not hesitate to contact me at (208) 332-2816.

Very truly yours,

Tonya Herold Corporate Division

Enclosures: cited

No. No. No. No. No. No. No. No.		INSTRUCTIONS ON REVERSE SILE	A Secretary of the secr
Secretary of State 700 W Jefferson P.O. Box 23720 P	102726 No.	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX
Secretary of State 700 W Jefferson P.O. Box 39720 P.O. Box 30720 P.O. Box 39720 P	Return To		
# FIRST NOTICE * NO FEE REQUIRED * FEDERAL WAY WA 98003 NO: 102726 4. Names and Addresses of Officers and Directors Name Street or P.O. Address City State Postal Code President: Secretary: Directors: ##A No hongu Opins Business in Idaho Church Mutachel I. Pres / Image Du 5. Nature of Business 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 Date Date Date	700 W Jefferson	IMAGE NORTHWEST, INC.	
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complete. Signature Date	Secretary:	*	
Name (Typeder Title	5. Nature of Business	complete.	• •
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