4		TRUCTIONS ON REVERSE SIDE	10.0	- Corr	
No. 034993		ration Annual Report Form	2. Registered Agent and	Office	
Return To Secretary of State		Due No Later Than November 1, 1987 1. Mailing Address — Please Correct 63493 CEIVED CALL SWICH & FARK SUPPLY OF REXBU		LAUREL W. MURPHY 665 EAST ANDERSON 10AHO FALLS. 10	
Room 203, Statehouse	RECEIVED				
Boise, ID 83720		RAKA SUPPLY OF KEAD RAHY	3. Incorporated Under T	he Laws- NTERED	
	80×2489507	******	of	1991	
87 00		IUAHO	1	he Lawse NTERED	
-	83402	8	STATE OF I	DAHO	
4. Names and Addresses of Off	to the second of the second		The second secon	. *	
	<u>Name</u>	Street or P.O. Address	<u>City</u>	State Zip	
	urel W. Murphy	P. O. Box 1866	Idaho Falls	Idaho 83403	
Secretary: A11 Directors:	len J. Murphy	P. O. Box 1866	Idaho Falls	Idaho 83403	
			· 1		
			\wedge		
5. Nature of Business	6. I certify true, corr	that this Annual Report has been ex- rechand complete.	amined by me and is to the	best of my knowledge	
	Signature	11 ALLIN ///// LAN	Date 1	0/12/87	
	Name (Typed				