No. c 79012	Annual Report Form  Due No Later Than November 3	<sub>30</sub> 1999	2. Registered Agent an	d Office NOT	A P.O. BOX
SECRETARY OF STATE	Mailing Address - Please Correct, If Not Cor		MICHAEL R 714 "0" S		ı
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	RINARD OPTICAL LAB, IN	C.	LEWISTON	ID	83501
NO FEE REQUIRED	1446 MAIN ST.		3. Organized Under the Laws of:		
	LFWISTON ID 83  Business Addresses of President, Secretary are resident Addresses of Managers or	501 1907 nd Directors	<u> </u>	<u>C 79</u>	012
Office held Name	Street or P.O. Address		City	State	Zip
Pres mike Ri	inard 1683 Old Spira	j Newy	Lewiston	$\varpi$	8354
Sec/Trea Carol Ri	inard 1683 Old Spi	ral Huy	Lewiston	$\mathfrak{I}$	83 <b>5</b> 4
				.,	
5. <u>New</u> Registered Agent Signate	ure 6. Signature	:KKen	Date 15	14 99	'
	Name (Typed or	mike f	Linad Title P	<u>res</u>	
ISSUED: 10-01-19	799		4.	453	
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