

ISSUED: 07-05-1994

No. 104834	Idaho Corporation Annual Report Form		2. Registered Agent and Office																					
Return To Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	Due No Later Than November 1, 1994		RODNEY L MEDLEY 479 S SPOONBILL MERIDIAN ID 83642																					
	1. Mailing Address - RIMI, INC. RODNEY L MEDLEY 479 S SPOONBILL MERIDIAN ID 83642																							
3. Incorporated Under The Laws of ID NO: 104834																								
4. Names and Addresses of Officers and Directors <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%; text-align: center;">Name</th> <th style="width: 30%; text-align: center;">Street or P.O. Address</th> <th style="width: 15%; text-align: center;">City</th> <th style="width: 15%; text-align: center;">State</th> <th style="width: 10%; text-align: center;">Zip</th> </tr> </thead> <tbody> <tr> <td>President: Rodney L Medley</td> <td>479 S. Spoonbill</td> <td>Meridian</td> <td>Id</td> <td>83642</td> </tr> <tr> <td>Secretary: Virginia E Medley</td> <td>479 S. Spoonbill</td> <td>Meridian</td> <td>Id.</td> <td>83642</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	Zip	President: Rodney L Medley	479 S. Spoonbill	Meridian	Id	83642	Secretary: Virginia E Medley	479 S. Spoonbill	Meridian	Id.	83642	Directors:				
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5. Nature of Business Mechanical Inspections.	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 border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature <i>Rodney L Medley</i> </td> <td style="width: 40%;"> Date 7-11-94 </td> </tr> <tr> <td> Name (Typed or Printed) Rodney L. Medley </td> <td> Title PRES. </td> </tr> </table>				Signature <i>Rodney L Medley</i>	Date 7-11-94	Name (Typed or Printed) Rodney L. Medley	Title PRES.																
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