

ISSUED: 10-01-1992

No. 53457	Idaho Corporation Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX																									
Return To	Due No Later Than November 1, 1993		ROBERT TRIPP																									
Secretary of State	1. Mailing Address: Please Correct, If Not Correct		3749 PARK ROAD																									
Room 203, Statehouse	ITEX OF IDAHO FALLS, INC.		IDAHO FALLS ID 83404 0000																									
Boise, ID 83720	ROBERT TRIPP		3. Incorporated Under The Laws																									
** FINAL NOTICE **	3749 PARK ROAD		of ID																									
NO FEE REQUIRED	IDAHO FALLS ID 83404 0000		No: 53457																									
4. Names and Addresses of Officers and Directors																												
<table border="1"> <thead> <tr> <th></th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Robert Tripp</td> <td>3749 Park Road</td> <td>Idaho Falls</td> <td>ID</td> <td>83404</td> </tr> <tr> <td>Secretary:</td> <td>" "</td> <td>" "</td> <td>" "</td> <td>" "</td> <td>" "</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						Name	Street or P.O. Address	City	State	Zip	President:	Robert Tripp	3749 Park Road	Idaho Falls	ID	83404	Secretary:	" "	" "	" "	" "	" "	Directors:					
	Name	Street or P.O. Address	City	State	Zip																							
President:	Robert Tripp	3749 Park Road	Idaho Falls	ID	83404																							
Secretary:	" "	" "	" "	" "	" "																							
Directors:																												
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.																										
Business Consulting		<table border="1"> <tr> <td>Signature</td> <td>Date 11/3/92</td> </tr> <tr> <td>Name (Typed or Printed) Robert Tripp</td> <td>Title President</td> </tr> </table>			Signature	Date 11/3/92	Name (Typed or Printed) Robert Tripp	Title President																				
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