

| No. 94775 | Idaho Corporation Annual Report Form <i>Due No Later Than November 1, 1992</i> | | 2. Registered Agent and Office NOT A P.O. BOX MICHAEL CARLSON ARABI 1806 POWERS AVE. LEWISTON ID 83501 | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|---|---|--------------|------------|-------------|-------------------------------|-------------|--------------|------------|------------|-----------------------|------------------|----------|----|-------|------------|---|---|---|---|---|------------|-----------------------|---|---|---|---|
| Return To Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE * NO FEE REQUIRED | 1. Mailing Address — Please Correct If Not Correct TEXAS CONTROLS, INC. MICHAEL CARLSON ARABI 1806 POWERS AVE. LEWISTON ID 83501 0000 | | 3. Incorporated Under The Laws of TX NO: 94775 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. Names and Addresses of Officers and Directors <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;"></th> <th style="width: 30%; text-align: center;"><u>Name</u></th> <th style="width: 30%; text-align: center;"><u>Street or P.O. Address</u></th> <th style="width: 10%; text-align: center;"><u>City</u></th> <th style="width: 10%; text-align: center;"><u>State</u></th> <th style="width: 10%; text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Michael Carlson-Arabi</td> <td>1806 Powers Ave.</td> <td>Lewiston</td> <td>ID</td> <td>83501</td> </tr> <tr> <td>Secretary:</td> <td style="text-align: center;">"</td> <td style="text-align: center;">"</td> <td style="text-align: center;">"</td> <td style="text-align: center;">"</td> <td style="text-align: center;">"</td> </tr> <tr> <td>Directors:</td> <td>Kathryn Carlson-Arabi</td> <td style="text-align: center;">"</td> <td style="text-align: center;">"</td> <td style="text-align: center;">"</td> <td style="text-align: center;">"</td> </tr> </tbody> </table> | | | | | | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | President: | Michael Carlson-Arabi | 1806 Powers Ave. | Lewiston | ID | 83501 | Secretary: | " | " | " | " | " | Directors: | Kathryn Carlson-Arabi | " | " | " | " |
| | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | | | | | | | | | | | | | | | | | | | | | | | |
| President: | Michael Carlson-Arabi | 1806 Powers Ave. | Lewiston | ID | 83501 | | | | | | | | | | | | | | | | | | | | | | | |
| Secretary: | " | " | " | " | " | | | | | | | | | | | | | | | | | | | | | | | |
| Directors: | Kathryn Carlson-Arabi | " | " | " | " | | | | | | | | | | | | | | | | | | | | | | | |
| 5. Nature of Business Computer Software | | 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 <u>Michael M. Carlson-Arabi</u> Date <u>7-6-92</u> Name (Typed or Printed) Michael Carlson-Arabi Title President | | | | | | | | | | | | | | | | | | | | | | | | | | |