

October 26, 1994

CUSTOM AG, INC.
MIKE ADAMS
PO BOX 195
RIRIE ID 83443

RE: CUSTOM AG, INC. File Number C 100842

Dear Mr. Adams:

Please find enclosed your recently submitted annual report for the 1994-1995 fiscal year. We are unable to accept it in its present form. Please make the following correction(s) and return to this office.

Block 5 on your annual report must be completed to show the nature of business of the corporation.

If you have any questions or need further assistance, please do not hesitate to contact this office at (208) 334-2301.

Very truly yours,

Tonya Herold
Corporate Division

Enclosures: cited

No. 100842	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX
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 1. Mailing Address — Please Correct, If Not Correct CUSTOM AG, INC. ROBERT ADAMS P O BOX 195 RIRIE ID 83443	ROBERT ADAMS 13964 N 175 E RIRIE ID 83443 3. Incorporated Under The Laws of ID NO: 100842

4. Names and Addresses of Officers and Directors	MUST BE PRINTED OR TYPED																								
<table border="1"> <thead> <tr> <th data-bbox="18 405 393 444"></th> <th data-bbox="398 405 712 444">Name</th> <th data-bbox="716 405 1153 444">Street or P.O. Address</th> <th data-bbox="1158 405 1318 444">City</th> <th data-bbox="1323 405 1455 444">State</th> <th data-bbox="1460 405 1592 444">Zip</th> </tr> </thead> <tbody> <tr> <td data-bbox="18 447 393 497">President:</td> <td data-bbox="398 447 712 497"><i>B Robert Adams</i></td> <td data-bbox="716 447 1153 497"><i>13964N 175E</i></td> <td data-bbox="1158 447 1318 497"><i>Ririe</i></td> <td data-bbox="1323 447 1455 497"><i>Id</i></td> <td data-bbox="1460 447 1592 497"><i>83443</i></td> </tr> <tr> <td data-bbox="18 501 393 540">Secretary:</td> <td data-bbox="398 501 712 540"><i>Marla Adams</i></td> <td data-bbox="716 501 1153 540"></td> <td data-bbox="1158 501 1318 540"></td> <td data-bbox="1323 501 1455 540"></td> <td data-bbox="1460 501 1592 540"></td> </tr> <tr> <td data-bbox="18 543 393 844">Directors:</td> <td data-bbox="398 543 712 844"></td> <td data-bbox="716 543 1153 844"><i>Same</i></td> <td data-bbox="1158 543 1318 844"></td> <td data-bbox="1323 543 1455 844"></td> <td data-bbox="1460 543 1592 844"></td> </tr> </tbody> </table>		Name	Street or P.O. Address	City	State	Zip	President:	<i>B Robert Adams</i>	<i>13964N 175E</i>	<i>Ririe</i>	<i>Id</i>	<i>83443</i>	Secretary:	<i>Marla Adams</i>					Directors:		<i>Same</i>				
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Directors:		<i>Same</i>																							

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. Signature <i>Mike B Adams</i> Date <i>10/24/94</i> Name (Typed or Printed) <i>MIKE B ADAMS</i> Title <i>V-Pres</i>
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