

No. 093039	Idaho Corporation Annual Report Form		2. Registered Agent and Office																									
Return To REINSTATEMENT Secretary of State Room 203, Statehouse Boise, ID 83720	Due No Later Than November 1, 1992		Ralph L. Jacobs 6125 N. Government Way Coeur d' Alene, Id. 83814																									
	1. Mailing Address — Please Correct																											
	R. L. JACOBS PLUMBING, INC. RALPH L JACOBS P O BOX 506 HAYDEN LAKE ID 83835		3. Incorporated Under The Laws of ID 93039																									
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>Susie Jacobs</td> <td>P.O. Box 506</td> <td>Coeur d' Alene</td> <td>ID</td> <td>83814</td> </tr> <tr> <td>Secretary:</td> <td>Ralph Jacobs</td> <td>P.O. Box 506</td> <td>Coeur d' Alene</td> <td>ID</td> <td>83814</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:	Susie Jacobs	P.O. Box 506	Coeur d' Alene	ID	83814	Secretary:	Ralph Jacobs	P.O. Box 506	Coeur d' Alene	ID	83814	Directors:					
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Directors:																												
5. Nature of Business Plumbing Contractor		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"> <tr> <td>Signature</td> <td><i>Susie Jacobs</i></td> <td>Date</td> <td>6-17-93</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>SUSIE JACOBS</td> <td>Title</td> <td>PRESIDENT</td> </tr> </table>			Signature	<i>Susie Jacobs</i>	Date	6-17-93	Name (Typed or Printed)	SUSIE JACOBS	Title	PRESIDENT																
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