110.	042	Due no later than Apr 30,	2001	0.5	
Return to: SECRETARY OF STATE		Annual Report Form  1. Mailing Address - Correct in this box if confined in the second		2. Registered Agent and Office NO PO BOX  LAWRENCE BENTCIK	
PO BOX 83720		LAWRENCE BENTCIK			
BOISE, ID 83720-0080		726 MAIN AVE		ST. MARIES, ID 83861	
NO FILING FEE		CT MADIEC ID CO.			
NO FILING FEE IF		ST. MARIES, ID 83861		New Registered Agent Signature	
RECEIVED BY D	DATE DATE			1	
<ol> <li>Corporation</li> </ol>	าร: Enter Nam	nes and Business Addresses of Preside	ent Socrator	1	
Office held	Name	Ote 1 - Te and the second	ent, Secretary	y and Directors.	
	<u>amo</u>	Street or P.O. Address	_City	State	<u>Zip</u>
PRESIDENT	T ALIDEMO:	F DRYMAT-			<u> 711</u>
	TWMK GIV()	E BENTCIK, 726 MAIN	ST. M	MARIES ID	93061
SECRETARY	ETHEL BEN	ENTCIK 726 MAIN			83861
		720 MAIN	ST. M	MARIES, ID	83861
i. Organized Under t	the Laws of:	6. Signature Silve Mee Co	Auto	2 Date 2/1	2/01
	=				<del></del>
	106042	Name Printed)  LAWRENCE  Do Not Tape or Stapl	<del></del>	Title:XXXX PRES	