

| No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>Idaho Corporation Annual Report Form</b><br><b>1992</b><br><b>Due No Later Than November 1,</b>                                     |                                                                                                                                                                                                                                                                 | <b>2. Registered Agent and Office NOT A P.O. BOX</b><br><b>LOIS A BACON</b><br><b>1613 5TH AVE. N.</b><br><b>BOX 1613</b><br><b>LEWISTON ID 83501</b> |              |            |             |                               |             |              |            |            |               |              |             |  |       |            |                 |              |             |  |       |            |                |  |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|------------|-------------|-------------------------------|-------------|--------------|------------|------------|---------------|--------------|-------------|--|-------|------------|-----------------|--------------|-------------|--|-------|------------|----------------|--|--|--|--|
| Return To<br><br><b>Secretary of State</b><br><b>Room 203, Statehouse</b><br><b>Boise, ID 83720</b><br><br><b>* FIRST NOTICE *</b><br><b>NO FEE REQUIRED</b>                                                                                                                                                                                                                                                                                                                                                                           | <b>1. Mailing Address: - Please Correct If Not Correct</b>                                                                             |                                                                                                                                                                                                                                                                 |                                                                                                                                                       |              |            |             |                               |             |              |            |            |               |              |             |  |       |            |                 |              |             |  |       |            |                |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>ENDURE TRANSPORT INCORPORATED</b><br><b>LOIS A BACON</b><br><b>1613 5TH AVENUE N. BOX 1613</b><br><br><b>LEWISTON ID 83501 0000</b> |                                                                                                                                                                                                                                                                 | <b>3. Incorporated Under The Laws</b><br><b>of</b><br><b>NO: 76857</b>                                                                                |              |            |             |                               |             |              |            |            |               |              |             |  |       |            |                 |              |             |  |       |            |                |  |  |  |  |
| <b>4. Names and Addresses of Officers and Directors</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                        |                                                                                                                                                                                                                                                                 |                                                                                                                                                       |              |            |             |                               |             |              |            |            |               |              |             |  |       |            |                 |              |             |  |       |            |                |  |  |  |  |
| <table border="1"> <thead> <tr> <th></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Lois A. Bacon</td> <td>P. O. Box 73</td> <td>Asotin, Wa.</td> <td></td> <td>99402</td> </tr> <tr> <td>Secretary:</td> <td>Gerald L. Bacon</td> <td>P. O. Box 73</td> <td>Asotin, Wa.</td> <td></td> <td>99402</td> </tr> <tr> <td>Directors:</td> <td colspan="5">Same as Above.</td> </tr> </tbody> </table> |                                                                                                                                        |                                                                                                                                                                                                                                                                 |                                                                                                                                                       |              |            | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> | President: | Lois A. Bacon | P. O. Box 73 | Asotin, Wa. |  | 99402 | Secretary: | Gerald L. Bacon | P. O. Box 73 | Asotin, Wa. |  | 99402 | Directors: | Same as Above. |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <u>Name</u>                                                                                                                            | <u>Street or P.O. Address</u>                                                                                                                                                                                                                                   | <u>City</u>                                                                                                                                           | <u>State</u> | <u>Zip</u> |             |                               |             |              |            |            |               |              |             |  |       |            |                 |              |             |  |       |            |                |  |  |  |  |
| President:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Lois A. Bacon                                                                                                                          | P. O. Box 73                                                                                                                                                                                                                                                    | Asotin, Wa.                                                                                                                                           |              | 99402      |             |                               |             |              |            |            |               |              |             |  |       |            |                 |              |             |  |       |            |                |  |  |  |  |
| Secretary:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Gerald L. Bacon                                                                                                                        | P. O. Box 73                                                                                                                                                                                                                                                    | Asotin, Wa.                                                                                                                                           |              | 99402      |             |                               |             |              |            |            |               |              |             |  |       |            |                 |              |             |  |       |            |                |  |  |  |  |
| Directors:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Same as Above.                                                                                                                         |                                                                                                                                                                                                                                                                 |                                                                                                                                                       |              |            |             |                               |             |              |            |            |               |              |             |  |       |            |                 |              |             |  |       |            |                |  |  |  |  |
| <b>5. Nature of Business</b><br><b>Trucking, Hauling for</b><br><b>Hire.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                        | <b>6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.</b><br>Signature <u>Lois A. Bacon</u> Date <u>7-2-92</u><br>Name (Typed or Printed) <u>Lois A. Bacon</u> Title <u>President.</u> |                                                                                                                                                       |              |            |             |                               |             |              |            |            |               |              |             |  |       |            |                 |              |             |  |       |            |                |  |  |  |  |