

July 22, 1997

Douglas Ray McMaster
MASCO, INC. C55616
4850 Henry St
Boise ID 83709

RE: MASCO, INC. C55616

Greetings:

Please find enclosed your recently submitted annual report for the 1997-1998 fiscal year. We are unable to accept it in its present form. Please make the following correction(s) and return to this office.

The annual report must be signed by an **officer** of the corporation **or** the **chairman** of the board of directors.

If you have any questions or need further assistance, please do not hesitate to contact this office at (208) 332-2811.

Very truly yours,



Sheryl DeVries
Corporate Division

Enclosures: cited

No. C 55616	Annual Report Form 1907 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct MASCO, INC. DOUGLAS RAY MCMASTER 4850 HENRY ST BOISE ID 83709		DOUGLAS R MCMASTER 4850 HENRY ST BOISE ID 83709 3. Organized Under the Laws of: ID C 55616																			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1" data-bbox="19 351 1466 510"> <thead> <tr> <th>Office held</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>Douglas McMaster</td> <td>10040 Highlander</td> <td>Boise</td> <td>ID</td> <td>83709</td> </tr> <tr> <td>Secretary</td> <td>Doug DeLong</td> <td>135 Floating Feather</td> <td>Eagle</td> <td>ID</td> <td>83616</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	President	Douglas McMaster	10040 Highlander	Boise	ID	83709	Secretary	Doug DeLong	135 Floating Feather	Eagle	ID	83616
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5.	6. <table border="0" data-bbox="530 702 1466 808"> <tr> <td>Signature</td> <td>_____</td> <td>Date</td> <td>7-17-97</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Doug DeLong</td> <td>Title</td> <td>_____</td> </tr> </table>				Signature	_____	Date	7-17-97	Name (Typed or Printed)	Doug DeLong	Title	_____										
Signature	_____	Date	7-17-97																			
Name (Typed or Printed)	Doug DeLong	Title	_____																			

ISSUED: 07-04-1997

DO NOT TAPE OR STAPLE

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