

40108

No.	Idaho Corporation Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX																					
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 ★ FIRST NOTICE ★ NO FEE REQUIRED	Due No Later Than November 1, 1992		JAMES MASON																					
	1. Mailing Address — Please Correct, If Not Correct		2070 W. BROADWAY																					
	MASONS, INC.		IDAHO FALLS ID 83402																					
	ELLEN D. MASON		3. Incorporated Under The Laws																					
	2070 WEST BROADWAY		of ID																					
	IDAHO FALLS ID 83402 0000		NO: 40108																					
4. Names and Addresses of Officers and Directors																								
<table border="1"> <thead> <tr> <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: James Mason</td> <td>2070 W Broadway</td> <td>Id Falls</td> <td>Id</td> <td>83402</td> </tr> <tr> <td>Secretary: Ellen D Mason</td> <td>" "</td> <td>" "</td> <td>" "</td> <td>" "</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					Name	Street or P.O. Address	City	State	Zip	President: James Mason	2070 W Broadway	Id Falls	Id	83402	Secretary: Ellen D Mason	" "	" "	" "	" "	Directors:				
Name	Street or P.O. Address	City	State	Zip																				
President: James Mason	2070 W Broadway	Id Falls	Id	83402																				
Secretary: Ellen D Mason	" "	" "	" "	" "																				
Directors:																								
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.																						
None Improvement		Signature <u>Ellen D Mason</u> Date <u>7-10-92</u> Name (Typed or Printed) Title																						