

INSTRUCTIONS ON REVERSE SIDE

ISSUED: 10-02-1993

No. 52651	Idaho Corporation Annual Report Form Due No Later Than November 1, 1993		2. Registered Agent and Office NOT A P.O. BOX DICK M. JENKINS 905 LINCOLN ROAD IDAHO FALLS ID 83401																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 ** FINAL NOTICE ** NO FEE REQUIRED	1. Mailing Address: <i>(Leave Blank if Not Changed)</i>		3. Incorporated Under The Laws of ID NO: 52651																									
	POCKETS', INC. DICK M. JENKINS BOX 51568 IDAHO FALLS ID 83405																											
4. Names and Addresses of Officers and Directors MUST BE PRINTED OR TYPED																												
<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>DICK JENKINS</td> <td>1932 MASTERS</td> <td>IDAHO FALLS</td> <td>ID</td> <td>83401</td> </tr> <tr> <td>Secretary:</td> <td>MARY KAY JENKINS</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	DICK JENKINS	1932 MASTERS	IDAHO FALLS	ID	83401	Secretary:	MARY KAY JENKINS	"	"	"	"	Directors:					
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Directors:																												
5. Nature of Business POOL HALL		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u><i>Dick Jenkins</i></u> Date <u>10-26-93</u> Name (Typed or Printed) _____ Title <u><i>Pres</i></u>																										