(No. " 1 • 7 5	Annual Report Form 2. Registered Agent and Office NOT A P.O. BOX Due No Later Than November 30,
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Please Correct, If Not Correct LEW'S ACROSS THE RIVER SMOKE LEWIS ALLERT S 1350 KELLY RD COEUR D'ALEN ID 83814
NO FEE REQUIRED * FIRST NOTICE *	COEUR D*ALEVE ID 33814 3. Organized Under the Laws of: ID 495
Corporations: Enter Names and Limited Liability Companies: Enter	Addresses of President, Secretary and Directors or Names and Addresses of Managers or Members (check one)
Office held Name Managing Lewis 1	Allert 5.1350 Kelly Rd Chaural'Allene ID 83814
Managing Jeffrey Managing Jeffrey	Anterson E 5000 16th Postfolks ID 83854
5. SIGNATURE OF CURRE	NT RA 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 Date 7-24-94
ANY LAWFUL	Name (Typed or Lewis Allert Title Man. Member