July 14, 1994

VIDEO SHOPPE, INC. (THE) DARREN E JOSEPHSON PO BOX 1445 IDAHO FALLS ID 83403

RE: THE VIDEO SHOPPE, INC. File Number C 84364

Dear Mr. Josephson:

Please find enclosed your recently submitted annual report for the 1994-1995 fiscal year. We are unable to accept it in its present form. Please make the following correction(s) and return to this office.

You have stated that your corporation has gone out of business or is not transacting business in Idaho. The records of this office, however, do not indicate that the corporation has filed a formal dissolution.

If you wish to formally dissolve your corporation, you must comply with the requirements of Section 30-1-92, Idaho Code, by filing Articles of Dissolution in duplicate with this office along with the required statutory fee of \$30.00. (Enclosed is the Idaho Corporation Act for your benefit) The Articles of Dissolution should be filed before December 1, 1994 or an annual report filed by December 1, 1994 to avoid forfeiture.

If instead you wish to just allow the corporation to forfeit its right to do business in Idaho, then please disregard any subsequent annual report forms which you may receive and the corporation will be automatically forfeited on December 1, 1994.

If you have any questions or need further assistance, please do not hesitate to contact this office at (208) 334-2301.

Very truly yours,

Tonya Herold Corporate Division

Enclosures: cited

*	69	nga ng	INSUED: 07-	05-1994	
No. 84364	Idaho Corporation Annual Report Form Due No Later Than November 1/1 994 1. Mailing Address —			2. Registered Agent and Office	
Return To			DARREN E. JOSEPHSON 390 SOUTH WOODRUFF		
Secretary of State				· [[韓宗帝繼章 경기 [[宋]] [[[[[[[[[[[[[[[[[[
Room 203, Statehouse P.O. BOX 83720	VIDEO SHOPPE, INC. (THE) DARREN E. JOSEPHSON BOX 1445		IDAHO FALLS	ID 83401	
Boise, ID 83720-0080 * FIRST NOTICE *			3. Incorporated Under The Laws of ID		
NO FEE REQUIRED	IDAHO FALLS	ID 83403	NO: 84364		
4. Names and Addresses of Officer	s and Directors	The second second			
	Name	Street or P.O. Address	City	State Zip	
President:			RECEIVED JUL	1 199	
Secretary: Directors:				1	
	: 1		TOT DESCRIPTION		
7/1	'S DUSINESS M	as give	CENE		
ad	of business	Ard No	, 'ME		
₽V 4	es business his business Lunger &	exists.			
			7		
5. Nature of Business	6. I certify that	Annual Report has been ex	amined by me and is to the h	est of my knowledge	
	true, correct	nd complete.	- , 5	an al	
	Name (Typed or Printed)	DARNERE! 10	Date Title	10-17-	