

## INSTRUCTIONS ON REVERSE SIDE

No. 80399		Idaho Corporation Annual Report Form Due No Later Than November 1, 1991		2. Registered Agent and Office NOT A P.O. BOX																									
Return To  Secretary of State Room 203, Statehouse Boise, ID 83720		1. Mailing Address. Please Correct If Not Correct		JESSICA M. MASON 601 EAST SELTICE WAY #103																									
NO FEE REQUIRED		DOUBLE M., INC. JESSICA M. MASON 601 EAST SELTICE WAY STE#		POST FALLS ID 83854																									
POST FALLS		ID 83854		3. Incorporated Under The Laws of ID  NO: 080399																									
4. Names and Addresses of Officers and Directors																													
<table> <thead> <tr> <th></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>Terry A Mason</td> <td>E 625 First</td> <td>Post Falls</td> <td>ID</td> <td>83854</td> </tr> <tr> <td>Secretary:</td> <td>Jessica M Mason</td> <td>E 625 First</td> <td>Post Falls</td> <td>ID</td> <td>83854</td> </tr> <tr> <td>Directors:</td> <td>Same</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>							Name	Street or P.O. Address	City	State	Zip	President:	Terry A Mason	E 625 First	Post Falls	ID	83854	Secretary:	Jessica M Mason	E 625 First	Post Falls	ID	83854	Directors:	Same				
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Directors:	Same																												
5. Nature of Business Tax/Accounting		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>Jessica M. Mason</u> Name (Typed or Printed) <u>JESSICA M. MASON</u>		Date <u>7-8-91</u> Title <u>Secretary</u>																									