

85682

INSTRUCTIONS ON REVERSE SIDE PLEASE FILE COPY

No.	Idaho Corporation Annual Report Form Due No Later Than November 1, 1992		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	1. Mailing Address - Please Correct If Not Correct		ROBERT DEMPSAY 625 W. 110 S. PAUL ID 83347																									
	ARL-RO. INC. ROBERT N. DEMPSAY P. O. BOX 483 PAUL ID 83347 0000		3. Incorporated Under The Laws of NO: 85682																									
4. Names and Addresses of Officers and Directors <table border="1"> <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>ROBERT DEMPSAY</td> <td>Box 483</td> <td>PAUL</td> <td>ID</td> <td>83347</td> </tr> <tr> <td>Secretary:</td> <td>ARLENE DEMPSAY</td> <td>Box 483</td> <td>PAUL</td> <td>ID</td> <td>83347</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						Name	Street or P.O. Address	City	State	Zip	President:	ROBERT DEMPSAY	Box 483	PAUL	ID	83347	Secretary:	ARLENE DEMPSAY	Box 483	PAUL	ID	83347	Directors:					
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Secretary:	ARLENE DEMPSAY	Box 483	PAUL	ID	83347																							
Directors:																												
5. Nature of Business AUTO RESTORATION	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="1"> <tr> <td>Signature</td> <td><i>Arlene Dempsay</i></td> <td>Date</td> <td><i>7-9-92</i></td> </tr> <tr> <td>Name (Typed or Printed)</td> <td></td> <td>Title</td> <td><i>Secretary</i></td> </tr> </table>				Signature	<i>Arlene Dempsay</i>	Date	<i>7-9-92</i>	Name (Typed or Printed)		Title	<i>Secretary</i>																
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