		ation Annual Report Form	2. Registered Agent an	d Office NO	TAPO BO
Return To  Secretary of State Room 203, Statehouse Boise, ID 83720  * FIRST NOTICE * NO FEE REQUIRED	Due No Later Than November 1, 100%  I. Mailing Address of the Control of the Control		HERB POINTS		
			BO9 CENTER STREET		
	FOXY'S BILLARDS & RESTAURANT, I HERB POINTS 809 CENTER STREET		PAYETTE	ID	83661
			3. Incorporated Under The Laws		
	PAYETTE	ID 83661	of ID NO: 74978		
Names and Addresses of Office	rs and Directors	MUET EE PANCES			
	<u>Name</u>	Street or P.O. Address	City	State	Zio
resident: Louis Wisecretary: Glenda		873 DE YTH Ave	OUTALIO	or	97814
lirectors:					
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	8. I certify the	at this Annual Report has been exarct and complete.	·	best of my k	nowledge