No. C 7+507	Annual Report Form 1 y ?  Due No Later Than November 30,	2. Registered Agent	and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON	1. Mailing Address - Please Correct, If Not Correct KLUSS APPLIANCE, INC.	JAMES T.	KLUSS Main Street
PO BOX 83720 BOISE, ID 83720-0080	JAMES T. KLUSS 1112-14 MAIN STREET	LEWISTON	10 83501
NO FEE REQUIRED	3. Organized Under the Laws of:		the Laws of:
** FINAL NOTICE **	LEWISTON ID 83501	ID	c 74667
<ul> <li>Corporations: Enter Names a Limited Liability Companies: I</li> </ul>	nd Addresses of <b>President, Secretary and Directors</b> nter Names and Addresses of   Managers or   Member	ers (check one)	-
Office held Name	44 4 4 7 1 1 . A. A	City	State Zip
Resident Jan	105 T. Kluss 407.5th Ave	Lewiston	IN 83501
Chairman Re	ph T. Kluss 2410-13 - Ave	Lewiston	Id 83501
Secuelary Ein	een M. Kluss 2410-13th Ave	Lew Ston	II 83501
MATURE OF BURLE			
NATURE OF BUSINE	S 6. I certify that this Annual Report has bee knowledge true, correct and complete.	n examined by me and	d is to the best of my
APPLIANCE SALE	S & SERVICE	Date	11/31/94
	Name (Typed or Printed)	SE Title to	25 plat
ISSUED: 10-05-	1996		478
7 <b>%</b>		-	. •
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