SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F95000003408 (0)**

1. Corporation Name
ADVAL, INC.

Principal Place of Business	Mailing Address
1220 MAIN STREET, SUITE 360 VANCOUVER WA 98660	1220 MAIN STREET, SUITE 360 VANCOUVER WA 98660

3. Date Incorporated or Qualified: 07/17/1995
3a. Date of Last Report:

2. Principal Place of Business
21: 1111 Third Ave., #1600
22 Suite, Apt. #, etc: Suite 1
23 City & State: Seattle WA
24 Zip: 98101 25 Country: USA

2a. Mailing Address: Attn: Law Dept.
26: 1111 Third Ave., #1600
27 Suite, Apt. #, etc:
28 City & State: Seattle WA
29 Zip: 98101 30 Country: USA

4. FEI Number: 52-1841828 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name: NRAI Services, Inc.
82 Street Address (P.O. Box Number is Not Acceptable): 526 E. Park Avenue
83: Tallahassee, FL 32301
84 City: Tallahassee **FL** 85 Zip Code: 32301

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Tina C. Leland — Tina C. Leland, Assistant Secretary — July 8, 1996
Signature, Typed or Printed Name of Registered Agent and Title of Applicable (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PDS BERNS, THEODORE D 1220 MAIN STREET, SUITE 360 VANCOUVER WA 98660	☒ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VTD DEAN, DONALD A 7564 STANDISH PLACE, SUITE 123 ROCKVILLE MD 20855	☒ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	P Betti Fujikado 1111 Third Avenue Seattle, WA 98101	☐ Change ☒ Addition
21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	S Paul P. Senio 1111 Third Avenue #1600 Seattle, WA 98101	☐ Change ☒ Addition
31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	Asst/S Wendy Kirkendall 1111 Third Avenue #1600 Seattle, WA 98101	☐ Change ☒ Addition
41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	D William H. Oberlin 1111 Third Avenue #1600 Seattle, WA 98101	☐ Change ☒ Addition
51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP		☐ Change ☐ Addition
61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	700001896077 -07/17/96--01024--012 ***225.00	☐ Change ☐ Addition

CR2E034 (3/96)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Paul P. Senio — 6/18/96 (206)628-8000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Paul P. Senio, Secretary — Daytime Phone # — 6/16/96