SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL PEPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

F97000001874 (3)

FILED Aug 13 1998 8:00am Secretary of State

GST NE	ET, INC.			 	Ba rra agus a 11881 1894 1884 318 4 1884	
'	ce of Business	Mailing Address				
4317 NE THURSTON WAY VANCOUVER WA 98862		4317 NE THURSTON WAY				
VANCAUVER	WA 80002	VANCOUVER WA 98662		DO NOT WRITE IN	THIS SPACE	
				3. Date Incorporated or Qualified		
				03/24/1997		
2. Principal Place of Business		2a. Mailing Address	04	4. FEI Number	Applied For	
21 4001 Main St.		26 4001 Main	St.	91-1694180	Not Applicable	
Suite, Apt. #, etc. 22		Sulte, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Sta	nte	City & State		6. Election Campaign Financing	\$5.00 May Be	
	repurer, WA	28 Vancouver		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid th		
24 9861		20 98663 3	o] Clark	Personal Property Tax due June 30.	Yes No	
Ta if	9. Name and Address of Current		B1 Name	10. Name and Address of New Regist	erea Agent	
	E PRENTICE-HALL CORPORATION	N STOLEM, INC.				
1201 HAYS STREET TALLAHASSEE FL 32301			82 Street	Address (P.O. Box Number is Not Acceptable)		
IAL	LATINGSEE FL 32301		83			
			84 City		FL 85 Zip Code	
11. Pursuar	nt to the provisions of sections 607.050	2 and 607,1508, Florida Statutes.	the above-named or	orporation submits this statement for the purpose		
office of	r registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was aut	horized by the corpo	orporation submits this statement for the purpose oration's board of directors. I hereby accept the	appointment as registered	
		ations of section 607.0000, Front	ia Gialdies.			
SIGNATURE	Signature, typed or printed name of registered agen	nt and title if applicable. (NOTE	Registered Agent signatur	re required when rainstating) Do	ATE	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12	
TITLE	PCD	DELETE	1.1 TITLE		Change Addition	
NAME	WARTA, JOHN	• `	1.2 NAME			
STREET ADDRESS			1.3 STREET ADDRESS			
CITY-ST-ZIP	VANCOUVER WA	· · · · · · · · · · · · · · · · · · ·	1.4 CITY-ST-ZiP	-12 K		
TITLE	VSTD	DELETE	2.1 TITLE	WD	Change Addition	
NAME	SANDER, CLIFFORD V	V.	2.2 NAME	40 Ch		
STREET ADDRESS			2.3 STREET ADDRESS	you Main St		
CITY-ST-ZIP	VANCOUVER WA		2.4 CITY-ST-ZIP	Vancouver, WA 98663		
TITLE	D IDMANN CTEDUEN	[] DELETE	3.1 TITLE	SD	Change Addition	
NAME	IRWIN, STEPHEN 505 PARK AVENUE		3.2 NAME			
STREET ADDRESS	NEW YORK NY		3.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	HEN TORNIT	F-1	3.4 CiTY-ST-ZiP 4.1 TiTLE	PC -	17 17	
NAME		L] DELETE	4.1 TITLE 4.2 NAME	Basile, Joseph Jr.	Change X Addition	
STREET ADDRESS	.1		4.6 NAME	11217 NE Thurston Way		
CITY-ST-ZIP			4.3 STREET AUDICESS	4317 NE Thurston Way Vancouver, WA 98662		
TITLE		[7]	5.1 TITLE	VIMILULUEY / WAT 1000 Z	Change Addition	
			E *** *****			
NAME	•	DELETE	52 NAME		C Vitalige Modition	
NAME STREET ADDRESS		[_] DELETE	5.2 NAME		C Algude	
STREET ADDRESS		Γ") berε⊥ε	5.3 STREET ADDRESS		C visite C Molicul	
STREET ADDRESS CITY-ST-ZIP			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			
STREET ADDRESS CITY-ST-ZIP TITLE		[_] DELETE	5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME			53 STREET ADDRESS 54 CITY-ST-ZIP 6.1 TITLE 6.2 NAME			
STREET ADDRESS CITY-ST-ZIP TITLE			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE			

14. I hereby certify that the information supplied with this filing 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 suppliemental 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 comporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed of an attachment with an address.

SIGNATURE:

1011ABNH: N. Sander cro