COMMONWEALTH OF KENTUCKY JOHN Y. BROWN III, SECRETARY OF STATE ANNUAL REPORT (See Reverse Side for Filing Instructions)

					(4) FILING FEE
RECORD#	0003360	0	UE JUNE 30,	1996	15.00
ELFANI HISHNA	CORPORATE NAME AND P D? REARD, INC. NY # 60 NSBURG, KY. 401		DRESS:		(5) STATE OF COUNTRY OF INCORPORATION
2) PRINCIPAI	I. OFFICE ADDRESS IS HERE		7 1 4 1	996	(6) DATE OF INCORPORATION OR AUTHORIZATION TO TRANSACT BUSINESS
3) REGISTEN	ED AGENT AND REGISTERE	D OFFICE ADDRESS:		(7) PLEASE	MAIL A STATEMENT OF CHANGE FORM TO:
	GRAUSE NY # 60 NSBURG, KY. 401	43			
Changes made	e to the registered agent or registere See Filing Instructions on reve-		s form.	<u></u>	
PLEAS PRESIDENT _	SE TYPE OR PRINT THE NAM Mary Grause , P.				ION'S CURRENT PRINCIPAL OFFICERS.
					0143
REASURER .	Johnnie C. Rhodes	<u>впоС. ОО- 74А Н</u>	g 110, McD	aniels "Ky	. 40152
	ired to be listed . No listing of direct See Filing Instructions on reverse s	ors is verification that the corpo ide.	oration has dispens	ed with the board	ORPORATION'S DIRECTORS. of directors. Non-profit corporations must list three (3)
	I INCADMATION IN THE ANNUAL	ISAL DEDODE IS AURON	NT AC OF THE	DATE THE PE	DODY IS EVER!ITED
	I INFORMATION IN THIS ANN SIGNATURE <u>8/11 / 11 / 1</u>				sident DATE June 4, 1994
PROFESSION/ ddresses of all	AL SERVICE CORPORATIONS I snareholders of the profession C	ONLY: In addition to the al service corporation and ERTIFICATE OF PROFE	annual report of the president sh SSIONAL SERV	ontent requirem all sign the cert ICE CORPORA	ent, there shall be included a list of names and lifticate below.
secre		sional service corporation	are duly qualifie	d as provided in	the directors, and all officers other than KRS Chapter 274 and a copy of such annual statement.

PRESIDENT'S SIGNATURE_