

This FINANCING STATEMENT is presented for filing pursuant to the Nevada Uniform Commercial Code.

1. DEBTOR (LAST NAME FIRST) Oh-Oh Incorporated, a Nevada Corporation, dba Valley Do-It Center		1A. SOCIAL SECURITY OR FEDERAL TAX NO. 88-0285256
1B. MAILING ADDRESS 1587 Hwy 395	1C. CITY, STATE Minden, NV	1D. ZIP CODE 89423-4101
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B)	1F. CITY, STATE	1G. ZIP CODE

2. ADDITIONAL DEBTOR (IF ANY)(LAST NAME FIRST)		2A. SOCIAL SECURITY OR FEDERAL TAX NO.
2B. MAILING ADDRESS	2C. CITY, STATE	2D. ZIP CODE
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B)	2F. CITY, STATE	2G. ZIP CODE

3. DEBTOR(S) TRADE NAMES OR STYLES (IF ANY) DBA VALLEY DO-IT CENTER		3A. FEDERAL TAX NO.
4. ADDRESS OF DEBTOR(S) CHIEF PLACE OF BUSINESS (IF ANY) 1587 Hwy 395		2A. CITY, STATE Minden, NV
		2B. ZIP CODE 89423-4101

5. SECURED PARTY NAME COMSTOCK BANK		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. 87-0351422
MAILING ADDRESS PO BOX 7610		
CITY RENO	STATE NV ZIP CODE 89510-7610	

6. ASSIGNEE OF SECURED PARTY (IF ANY) NAME		6A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.
MAILING ADDRESS		
CITY	STATE ZIP CODE	

7. This FINANCING STATEMENT covers the following types or items of property (If crops or timber, include description of real property on which growing or to be grown and name of record owner of such real estate, if fixtures, include description of real property to which affixed or to be affixed and name of record owner of such real estate; If oil, gas or minerals, include description of real property from which to be extracted.)
All Inventory, Accounts, Equipment and General Intangibles; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and other accounts proceeds).

7A. _____ SIGNATURE OF RECORD OWNER

7B. _____ (TYPE) RECORD OWNER OR REAL PROPERTY

7C. \$ _____ MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)

8. Check <input checked="" type="checkbox"/> If Applicable	A <input checked="" type="checkbox"/> Proceeds of collateral are also covered	B <input checked="" type="checkbox"/> Products of collateral are also covered	C <input type="checkbox"/> Proceeds of above described original collateral in which a security interest was perfected	D <input type="checkbox"/> Collateral was brought into this State subject to security interest in another jurisdiction
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9. Check If Applicable DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403

10. _____ (Date) **12/15/98**

By: _____ (SIGNATURE(S) OF DEBTOR(S))
COMSTOCK BANK (TITLE)

By: _____ (SIGNATURE(S) OF SECURED PARTY(IES))
Ken D. Elder Com'l Loans Officer (TITLE)

12. This Space for Use of Filing Officer (Date, Time, File Number and Filing Officer)

08479

REQUESTED BY
Unisearch Inc
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

11. Please send acknowledgment copy to:

NAME **Attn: Carol Blynn**

ADDRESS **Unisearch, Inc.**

CITY, STATE AND ZIP **8175 South Virginia Suite 850-409**

Reno, NV 89511-8981

'99 APR 14 AM 11:00

LINDA SLATER
RECORDER

0465686 \$ **16** PAID **KE** DEPUTY

FILING FEES
SEE INSTRUCTIONS