| No. C 154885 | Due no later than May 31, 2005 | 2. Registered Agent and Office NO PO BOX |
|---|--|---|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | Annual Report Form 1. Mailing Address - Correct in this box, if applicable BOISE CENTER FOR COSMETIC DENTISTRY 5360 N EAGLE RD BOISE, ID 83713 | CYNTHIA A MCKIM DMD 5360 N EAGLE RD BOISE, ID 83713 |
| | | 3. New Registered Agent Signature |
| 4. Corporations: Enter Na | ames and Business Addresses of President, Secre | etary and Directors. |
| | | |
| tees Cyptha | Street or P.O. Address MKim 5360 NI FAGUE PD | MPE 1002113 |
| 5. Organized Under the Laws of: IDAHO C 154885 | 6. Signature Laufallia Mills Name Printed Or Cyrithia Mills | Date 3-16-05 |