No. <b>C 181836</b>		Due no later than Feb 28, 2013		2. Registere	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  OGATA CHIROPRACTIC INC. SHAWNA BAKER 5418 N EAGLE RD STE 120 BOISE ID 83713		5418 N E BOISE II	TY OGATA 5418 N EAGLE RD STE 120 BOISE ID 83713  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Corporations: Enter Names and Busine		and Addresses of D	wasidant Canabaw, and Divarian Tuana	unan (antianal)	(optional)			
Office Held Name		ess Addresses of P	Street or PO Address	City	State	Country	Postal Code	
SECRETARY PRESIDENT	Y TARRIE M OGATA		4234 N. WATERLOO AVE. 4234 N. WATERLOO AVE.	BOISE BOISE	ID ID	USA USA	83713 83713	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 181836		Signature: Ty Ogata Name (type or print): Ty Ogata			Date: 01/03/2013 Title: President/Owner			
Processed 01/03/2013		Electronically provided signatures are accepted as original signatures.						