No. C 120151	Due n	Due no later than Jul 31, 2010 2. Registered Agent and Address (NO PO BOX)					
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address STERLING DENTAL MARLEEN THOMA 1415 FILLMORE ST	Annual Report Form 1. Mailing Address: Correct in this box if needed. STERLING DENTAL, INC. MARLEEN THOMASON 1415 FILLMORE ST STE 702 TWIN FALLS ID 83301		MARLEEN THOMASON 1415 FILLMORE ST STE 3B TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
200 CO TO TO THE PROPERTY OF T	usiness Addresses of Pres	ident, Secretary, and Directors. Treas	urer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY TERESA LEE THOMASON		708 NORTH POINTE DRIVE	TWIN FALLS, ID	ID	USA	83301	
PRESIDENT MARLEE	N A THOMASON	708 NORTH POINTE DRIVE	TWIN FALLS, ID	ID	USA	33301	
DIRECTOR HALEY A	ANNETTE THOMASON	707 PEARL ST.	BOISE, ID 83705	ID	USA	83705	
5. Organized Under the Laws of: 6. Annual Report		st be signed.*					
ID Signature: Kath		en Thomason Date: 05/13/2010		3/2010			
C 120151 Name (type or p		nt): Kathleen Thomason	Title: Office Manager				
Processed 05/13/2010	* Electronically provide	* Electronically provided signatures are accepted as original signatures.					