

No. C 160451	Due no later than May 31, 2007 Annual Report Form		2. Registered Agent and Address (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	1. Mailing Address: Correct in this box if needed. COLE DIAGNOSTICS, INC. NOLAN SUNDRUD 12899 N SCHICK RIDGE RD BOISE ID 83714		RYAN N COLE MD 12899 N SCHICK RIDGE RD BOISE ID 83714			
			3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	RYAN N COLE	12899 N. SCHICKS RIDGE ROAD	BOISE	ID	USA	83714
DIRECTOR	NOLAN M SUNDRUD	12984 N. SCHICKS RIDGE ROAD	BOISE	ID	USA	83714
5. Organized Under the Laws of: UT C 160451	6. Annual Report must be signed.* Signature: Nolan M Sundrud Name (type or print): Nolan M Sundrud		Date: 06/11/2007 Title: Coo			
Processed 06/11/2007		* Electronically provided signatures are accepted as original signatures.				