	Due no later than February 28, 2006 Annual Report Form	2. Registered Agent and Office NO PO BO
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 applicable SCI-MED, INC. MICHAEL CWIK 2600A E SELTICE WAY POST FALLS, ID 83854	MICHAEL CWIK 2600A E SELTICE WAY POST FALLS, ID 83854 3. New Registered Agent Signature
 Corporations: Enter Nam 	es and Business Addresses of President, Secreta	ry and Directors.
Office field Name	Street or P.O. Address Cit	Y State Zip
Sec. Mary	wik 2600A E. Selfia-186 Pe	est falls ID 8385V ost Falls ID 8385V
5. Organized Under the Laws of:	6. Signature	Date 1-3-06
		Date <u>1-3-06</u> Title <u>Prec</u>