

42449

INSTRUCTIONS ON REVERSE SIDE PLEASE TYPE OR PRINT

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| No.  | Idaho Corporation Annual Report Form   | 2. Registered Agent and Office NOT A P.O. BOX        |
| Return To<br><br><b>Secretary of State</b><br><b>Room 203, Statehouse</b><br><b>Boise, ID 83720</b><br><br><b>* FIRST NOTICE *</b><br><b>NO FEE REQUIRED</b> | Due No Later Than November 1, 1992   | DR. RONALD KAY FIFE<br>74 EAST FIRST SOUTH           |
|  | 1 Mailing Address — Please Correct If Not Correct  | REXBURG ID 83440                                     |
|  | DR. RONALD KAY FIFE, PROFESSION<br>DR. RONALD KAY FIFE<br>74 EAST FIRST SOUTH<br><br>REXBURG ID 83440 0000 | 3. Incorporated Under The Laws<br>of ID<br>NO: 42449 |

## 4. Names and Addresses of Officers and Directors

|            | <u>Name</u>     | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> |
|------------|-----------------|-------------------------------|-------------|--------------|------------|
| President: | Ronald Kay Fife | 74 East First South           | Rexburg     | Id           | 83440      |
| Secretary: | Faye Fife       | 74 East First South           | Rexburg     | Id           | 83440      |
| Directors: |                 |                               |             |              |            |

## 5. Nature of Business

Dentist

## 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name (Typed or Printed)

 Faye Fife  
 Faye Fife

Date

Title

7-8-92

Secretary