

No. <b>C 144411</b>	<b>Due no later than June 30, 2004</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address - Correct in this box, if applicable  GARFIELD STREET PET CLINIC, P.A. KATHERINE L MILLER 202 S GARFIELD ST MOSCOW, ID 83843		KATHERINE L MILLER 202 S GARFIELD ST MOSCOW, ID 83843  3. <u>New</u> Registered Agent Signature												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.  <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Katherine L. Miller</td> <td>202 S. Garfield St</td> <td>Moscow</td> <td>ID</td> <td>83843</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President	Katherine L. Miller	202 S. Garfield St	Moscow	ID	83843
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
President	Katherine L. Miller	202 S. Garfield St	Moscow	ID	83843										
5. Organized Under the Laws of:  IDAHO C 144411		6. Signature <u>Katherine L. Miller</u> Date <u>4/8/04</u> Name <small>(Type or Printed)</small> <u>Katherine L. Miller</u> Title <u>President</u>													