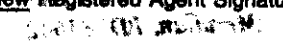
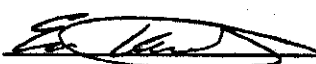


No. C 156298 Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than September 30, 2007 Annual Report Form 1. Mailing Address - Correct in this box, if applicable PROVENCIA DIGESTIVE HEALTH OF IDAHO STEPHANIE ANN KENNEDY 1233 MAIN ST MERIDIAN, ID 83642	2. Registered Agent and Office NO PO BOX STEPHANIE ANN KENNEDY 2337 W RAINFALL MERIDIAN, ID 83642 3. New Registered Agent Signature 																								
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Stephanie Kennedy</td> <td>2337 W. Rainfall</td> <td>Meridian</td> <td>ID</td> <td>83642</td> </tr> <tr> <td>Vice President</td> <td>Eric Kennedy</td> <td>2337 W. Rainfall</td> <td>Meridian</td> <td>ID</td> <td>83642</td> </tr> <tr> <td>Secretary</td> <td>Jasm Kennedy</td> <td>2337 W. Rainfall</td> <td>Meridian</td> <td>ID</td> <td>83642</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	President	Stephanie Kennedy	2337 W. Rainfall	Meridian	ID	83642	Vice President	Eric Kennedy	2337 W. Rainfall	Meridian	ID	83642	Secretary	Jasm Kennedy	2337 W. Rainfall	Meridian	ID	83642
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5. Organized Under the Laws of: IDAHO C 156298	6. Signature  Date 8-29-07 Name (Typed or Printed) Eric Kennedy Title Vice President																									

Issued 07/02/2007

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