

No. 95055	Idaho Corporation Annual Report Form Due No Later Than November 1, 1991		2. Registered Agent and Office NOT A P.O. BOX																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	1. Mailing Address: <i>Please Correct If Not Correct</i>		GREGORY M WILSON 2110 IRONWOOD PARKWAY COEUR D'ALENE ID 83814																									
	MEDICAL HYGIENE SYSTEMS, IN CLIFF NOLL 715 N 13TH ST COEUR D'ALENE ID 83814																											
			3. Incorporated Under The Laws of ID NO: 095055																									
4. Names and Addresses of Officers and Directors																												
<table border="0"> <thead> <tr> <th></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><i>Cliff Noll</i></td> <td><i>715 N 13th St</i></td> <td><i>Coeur d'Alene</i></td> <td><i>ID</i></td> <td><i>83814</i></td> </tr> <tr> <td>Secretary:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	<i>Cliff Noll</i>	<i>715 N 13th St</i>	<i>Coeur d'Alene</i>	<i>ID</i>	<i>83814</i>	Secretary:						Directors:					
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Secretary:																												
Directors:																												
5. Nature of Business <i>Manufacturing, Marketing</i>		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="0"> <tr> <td>Signature</td> <td><i>Cliff Noll</i></td> <td>Date</td> <td><i>July 18, 1991</i></td> </tr> <tr> <td>Name (Typed or Printed)</td> <td><i>CLIFF NOLL</i></td> <td>Title</td> <td><i>President</i></td> </tr> </table>			Signature	<i>Cliff Noll</i>	Date	<i>July 18, 1991</i>	Name (Typed or Printed)	<i>CLIFF NOLL</i>	Title	<i>President</i>																
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