

No. **C 152177**

Due no later than December 31, 2004
Annual Report Form

2. Registered Agent and Office **NO PO BOX**

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

VEIN CARE CENTER, CHARTERED
~~0000~~ 203 W. Fort st
BOISE, ID 83700 2

JESSE SANDOVAL DO
~~0000~~ 203 W. Fort st
BOISE, ID 83700 2

3. New Registered Agent Signature

**NO FILING FEE IF
RECEIVED BY DUE DATE**

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Pres	Jesse Sandoval	203 W. Fort st.	Boise	ID	83702
Secy	Lucia Sandoval	203 W Fort st	Boise	ID	83702

5. Organized Under the Laws of:

IDAHO
C 152177

6.

Signature

Lucia Sandoval

Date

10-11-04

Name
(Typed or
Printed)

Lucia Sandoval

Title

office mgk / V.P.

20041205766

Do Not Tape or Staple

Issued 10/01/2004