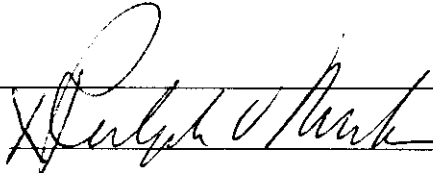


No. C 71694	Due no later than December 31, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX RALPH V. NISHITANI M.D. 222 N 2ND ST #112 BOISE, ID 83702												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable RALPH V. NISHITANI, M.D., P.A. RALPH V. NISHITANI M.D. 222 N 2ND ST #112 BOISE, ID 83702		3. <u>New</u> 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; width: 15%;"><u>Office held</u></th> <th style="text-align: left; width: 25%;"><u>Name</u></th> <th style="text-align: left; width: 30%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;">President</td> <td style="vertical-align: top;">Ralph V. Nishitani, M.D.</td> <td style="vertical-align: top;">222 N. 2nd St., #112</td> <td style="vertical-align: top;">Boise</td> <td style="vertical-align: top;">ID</td> <td style="vertical-align: top;">83702</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	Ralph V. Nishitani, M.D.	222 N. 2nd St., #112	Boise	ID	83702
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
President	Ralph V. Nishitani, M.D.	222 N. 2nd St., #112	Boise	ID	83702										
5. Organized Under the Laws of: <div style="text-align: center;">IDAHO C 71694</div>		6. Signature  Date <u>10-25-05</u> Name <small>(Typed or Printed)</small> <u>Ralph V. Nishitani,</u> Title <u>President</u>													

Issued 10/03/2005

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