




ISSUED: 07-05-1994

No. 33178	Idaho Corporation Annual Report Form		2. Registered Agent and Office																									
Return To Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	Due No Later Than November 1, 1994		BRAD HOBBS, M.D.																									
	1. Mailing Address — FOX-CUTLER BUILDING CO. BRAD R. HOBBS, M.D. 206 MARTIN STREET TWIN FALLS ID 83301		206 MARTIN STREET TWIN FALLS ID 83301 3. Incorporated Under The Laws of ID NO: 33178																									
4. Names and Addresses of Officers and Directors MUST BE PRINTED OR TYPED <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 35%; text-align: center;"><u>Name</u></th> <th style="width: 35%; text-align: center;"><u>Street or P.O. Address</u></th> <th style="width: 10%; text-align: center;"><u>City</u></th> <th style="width: 10%; text-align: center;"><u>State</u></th> <th style="width: 10%; text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Brad R Hobbs MD</td> <td>206 Martin</td> <td>Twin Falls</td> <td>ID</td> <td>83301</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:	Brad R Hobbs MD	206 Martin	Twin Falls	ID	83301	Secretary:						Directors:					
	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																							
President:	Brad R Hobbs MD	206 Martin	Twin Falls	ID	83301																							
Secretary:																												
Directors:																												
5. Nature of Business parking lot		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="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature  Name (Typed or Printed) Brad R Hobbs MD </td> <td style="width: 40%;"> Date 7-15-94 Title owner </td> </tr> </table>			Signature  Name (Typed or Printed) Brad R Hobbs MD	Date 7-15-94 Title owner																						
Signature  Name (Typed or Printed) Brad R Hobbs MD	Date 7-15-94 Title owner																											