	Due no later than September 30, 2005	2 Dogistanat A
Return to:	Annual Report Form	2. Registered Agent and Office NO PO BO
SECRETARY OF STATE	1. Mailing Address - Correct in this box, if applicable	PETER ERNEST JENSEN
700 WEST JEFFERSON	EYE PHYSICIANS OF IDAHO, P.A.	- OZO VIEVI VVAT
PO BOX 83720	1615 12TH AVENUE ROAD	NAMPA, ID 83686
BOISE, ID 83720-0080	NAMPA, ID 83651	
NO FILING FEE IF	1	New Registered Agent Signature
RECEIVED BY DUE DATE		
Corporations: Enter Nan	nes and Business Addresses of President, Secre	tany and Direct
Name	Street or P.O. Address	tary and Directors.
_	102 (a 1/10) 1/10	IN State Sip 8 S
1123 HOLD EVEN	son the view way	ID 83686
Sec Jaco A Mas	Times 1615-1276 Ave 21 Stell "	v (j
Sec. Jage A.Maf	Son 624 ViewWay No lines 1615-12th AveRd Ste B 11	v (I
Sec. Taye A Mar	fines 1615-12th AveRd. Ste B	v q
Sec. Jaye A. Maf	fines 1615-12th AveRd. Ste B	v (
Sec. Jaye A. Maf	Times 1615-1270 AveRd. Ste B	v (1
Sec. Tage A.Maf	fines 1615-1270 AveRd. Ste B	v (1
Sec. Taye A Maf	Times 1615-1270 AveRd. Ste B	v (4
O	Times 1615-12th AveRd. Ste B	v (1
Sec. Tage A. Maf	Times 1615-12th AveRd. Ste B	v (1
O	6. A	1 7/1.100
. Organized Under the Laws of:	-	Date 7/14/08
. Organized Under the Laws of: IDAHO	6. Signature	2/2
. Organized Under the Laws of: IDAHO	6. Signature	Date 7/14/08 Title Pres. 200509004030