

INSTRUCTIONS ON REVERSE SIDE

No. 97011

Idaho Corporation Annual Report Form

Due No Later Than November 1, 1997

1. Mailing Address (Please Print or Type Clearly)

DR. ROD EMORY, D.D.S., P.A.

DR. ROD EMORY D.D.S.

3270 N MAPLE GROVE RD

BOISE

ID 83704

ISSUED: 07-01-1998

2. Registered Agent and Office NOT A P.O. BOX

DR ROD EMORY D.D.S.

3270 N MAPLE GROVE

POISE

ID 83704

3. Incorporated Under The Laws

of

ID

NO: 97011

Return To

Secretary of State
Room 203, Statehouse
Boise, ID 83720★ FIRST NOTICE ★
NO FEE REQUIRED

4. Names and Addresses of Officers and Directors

MUST BE PRINTED OR TYPED

Name

Street or P.O. Address

City

State

Zip

President:

Rod Emory, D.D.S.

3270 N. Maple Grove Rd, Boise

Id. 83704

Secretary:

Tanya Emory

9831 W. Ripley St. , "

" "

Directors:

Both of the above

5. Nature of Business

Pediatric Dentistry

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name (Typed or Printed)

R. Emory D.D.S.
Rod Emory, D.D.S.

Date

7-8-93

Title

president