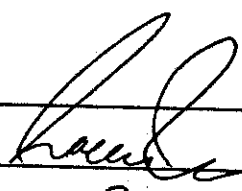


REINSTATEMENT

No. C 168793 Return to: SECRETARY OF STATE 480 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	Annual Report Form ADMIN DISSOLVED 12/05/2007 IDAHO KIDNEY FOUNDATION INCORPORATE 55 WASHINGTON ST STE 308 POCA TELLO, ID 83201	2. Registered Agent and Office NOT A P.O. BOX NAEEM RAHIM 444 HOSPITAL WAY STE 607 POCA TELLO, ID 83201 3. New registered agent signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>NAEEM RAHIM</td> <td>444 HOSPITAL WAY STE 607</td> <td>POCA TELLO</td> <td>ID</td> <td>83201</td> </tr> <tr> <td>DIRECTOR</td> <td>FAHIM RAHIM</td> <td>444 HOSPITAL WAY STE 607</td> <td>POCA TELLO</td> <td>ID</td> <td>83201</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	PRESIDENT	NAEEM RAHIM	444 HOSPITAL WAY STE 607	POCA TELLO	ID	83201	DIRECTOR	FAHIM RAHIM	444 HOSPITAL WAY STE 607	POCA TELLO	ID	83201
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DIRECTOR	FAHIM RAHIM	444 HOSPITAL WAY STE 607	POCA TELLO	ID	83201															
5. Organized under the laws of: IDAHO C 168793	6. Signature  Date 1-24-08 Name (Typed or Printed) NAEEM RAHIM Title PRESIDENT																			

Issued 1/24/2008 by SL1

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- Block 1:** Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address must be inside Block 1.
- Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.
- Block 3:** Only a new registered agent must sign in Block 3.
- Block 4:** Enter names and business addresses of president, secretary, and directors (for corporations only), management (for LLCs only), or at least two (2) partners (for LPs and LLPs only). **Note:** Putting "same as last year" or "same as above" will not be accepted.
- Block 5:** May not be altered through the use of this form.
- Block 6:** The annual report must be signed by a person authorized to represent the corporation/LLC/LP/LLP. Print or type the name and title of the signer below the signature.