

No. 94902	Idaho Corporation Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720	Due No Later Than November 1, 1991		NED W SCARISBRICK 819 S WILD PHLOX PLACE																									
	1. Mailing Address: <i>Please Correct If Not Correct</i>		BOISE ID 83709																									
	SCARISBRICK LABORATORIES, I NED W SCARISBRICK 819 S WILD PHLOX PLACE		3. Incorporated Under The Laws of ID																									
NO FEE REQUIRED	BOISE ID 83709		NO: 094902																									
4. Names and Addresses of Officers and Directors																												
<table border="0"> <thead> <tr> <th></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Ned Scarisbrick</td> <td>819 S. Wild Phlox Place</td> <td>Boise</td> <td>ID</td> <td>83709</td> </tr> <tr> <td>Secretary:</td> <td>Noretha Scarisbrick</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:	Ned Scarisbrick	819 S. Wild Phlox Place	Boise	ID	83709	Secretary:	Noretha Scarisbrick					Directors:					
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Secretary:	Noretha Scarisbrick																											
Directors:																												
5. Nature of Business		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.																										
Dental Laboratory		Signature <u>Ned Scarisbrick</u> Date <u>7/12/91</u> Name (Typed or Printed) <u>Ned Scarisbrick</u> Title <u>President</u>																										