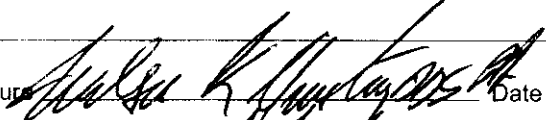
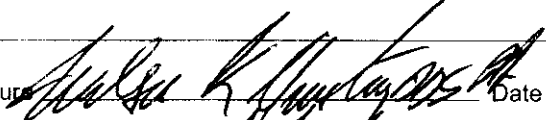
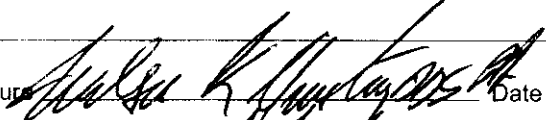


No. <b>C 111128</b>	<b>Due no later than June 30, 2004</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<div data-bbox="722 118 1399 159" style="background-color: black; color: white; text-align: center;">             1. Mailing Address - Correct in this box if applicable           </div> WILSON R. ARMSTRONG, DDS, P.A. WILSON R ARMSTRONG 718 W BRIDGE BLACKFOOT, ID 83221		WILSON R ARMSTRONG 718 W BRIDGE BLACKFOOT, ID 83221  3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Office held</th> <th style="width: 25%;">Name</th> <th style="width: 35%;">Street or P.O. Address</th> <th style="width: 15%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Wilson R. Armstrong DDS</td> <td>Blackfoot</td> <td>Idaho</td> <td></td> <td>83721</td> </tr> <tr> <td>Sec.</td> <td>Judy Armstrong</td> <td>Blackfoot</td> <td>ID</td> <td></td> <td>83721</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	President	Wilson R. Armstrong DDS	Blackfoot	Idaho		83721	Sec.	Judy Armstrong	Blackfoot	ID		83721
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5. Organized Under the Laws of:  IDAHO C 111128	6. <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Signature </td> <td style="width: 50%;">Date 17 April 04</td> </tr> <tr> <td>Name (Type or Printed) Wilson R. Armstrong DDS</td> <td>Title President</td> </tr> </table>			Signature 	Date 17 April 04	Name (Type or Printed) Wilson R. Armstrong DDS	Title President														
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