

No. <b>C 114922</b>	<b>Due no later than May 31, 2002 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>	1. Mailing Address - Correct in this box, if applicable  UNITED MEDICAL SOLUTIONS, INC. RENAE C YOUNG 1819 HOOPEES PO BOX 51906 IDAHO FALLS, ID 83402	RENAE C YOUNG 1819 HOOPEES  IDAHO FALLS, ID 83402  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="text-align: center;"><u>Office held</u></th> <th style="text-align: center;"><u>Name</u></th> <th style="text-align: center;"><u>Street or P.O. Address</u></th> <th style="text-align: center;"><u>City</u></th> <th style="text-align: center;"><u>State</u></th> <th style="text-align: center;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">Pres</td> <td>Renaec Young</td> <td>8140 N 45th E</td> <td>IF</td> <td>ID</td> <td>83401</td> </tr> <tr> <td style="text-align: center;">VP/Sec</td> <td>Karen L Clark</td> <td>354 Quigg Shelley</td> <td></td> <td>ID</td> <td>83274</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Pres	Renaec Young	8140 N 45th E	IF	ID	83401	VP/Sec	Karen L Clark	354 Quigg Shelley		ID	83274
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5. Organized Under the Laws of:  IDAHO C 114922	6. Signature <u><i>Renaec Young</i></u> Date <u>3/14/02</u> Name <small>(Typed or Printed)</small> <u>Renaec Young</u> Title <u>Manager</u>																			