No. <b>C 165755</b>		Due r	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  PETER OBLIGATO, M.D., INC.  PETER OBLIGATO MD INC  2281 E UPPER HAYDEN LAKE ROAD  HAYDEN ID 83835-7196		PETER OBLIGATO MD  2281 E UPPER HAYDEN LAKE ROAD  HAYDEN ID 83835-7196  3. New Registered Agent Signature:*			
NO FILING FEI RECEIVED BY DUI 4. Corporations: Enter Na	E DATE	USA ess Addresses of Pre	sident, Secretary, and Directors. Treasurer	(ontional)			
Office Held	Name	655 / taar 65565 61 1 1 6	Street or PO Address	City	State	Country	Postal Code
PRESIDENT SECRETARY			2281 E UPPER HAYDEN LAKE ROAD 2281 E UPPER HAYDEN LAKE ROAD	HAYDEN HAYDEN	ID ID	USA USA	83835-7196 83835-7196
5. Organized Under the Laws of:  CA C 165755		6. Annual Report must be signed.* Signature: Peter Obligato Name (type or print): Peter Obligato		Date: 01/17/2013 Title: Md			
Processed 01/17/2013		* Electronically prov	ided signatures are accepted as original sig	natures.			