

No. 52051	Idaho Corporation Annual Report Form	2. Registered Agent and Office
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEE REQUIRED	Due No Later Than November 1, 1990	WENDEL J. LEWIS, D.M.D. 30 PROFESSIONAL PLAZA
	1. Mailing Address — Please Correct	REXBURG ID 83340 7
	WENDEL J. LEWIS, D.M.D., P. WENDEL J. LEWIS, D.M.D. 30 PROFESSIONAL PLZ REXBURG ID 83440	3. Incorporated Under The Laws of ID NO: 052051

4. Names and Addresses of Officers and Directors

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	WENDEL J. LEWIS DMD	115 BIRCH AVE.	REXBURG	10.	83440
Secretary:	SHARON B. LEWIS	115 BIRCH AVE.	REXBURG	10.	83440
Directors:					

5. Nature of Business

DENTISTRY

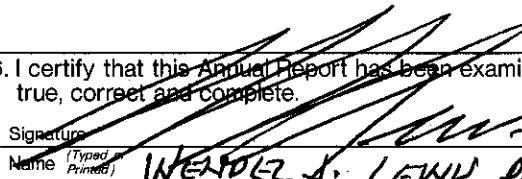
6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name (Typed or Printed)

Date

Title


 WENDEL J. LEWIS DMD

 15 Oct 90
 pres.