| No. C 71229 | Reinstatement Annual Report Form ADMIN DISSOLVED 02/08/2007 1. Mailing Address: Correct in this box if seeded. IDAHO AMBUCARE CENTER, INC. GARY BOTIMER MD PO BOX 720 NAMPA ID 83653-0720 | | 2. Registered Agent and Office (NOT A P.O. BOX) GARY BOTIMER MD 215 E HAWAII NAMPA ID 83651 3. <u>New</u> Registered Agent Signature. | | |
|--|---|---|--|----------|---|
| SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 | | | | | |
| REINSTATEMENT FEE DUE: \$30.00 | | es of President, Secretary, Directors | | | |
| Office Held Nam Pres Bard member Pe Sec. "G Board member Ga "Board member Ga "Board member Ga "Do "Do "Do "Do "Do "Do "Do "Do | Her E Jensen War E Jensen Ung Botimer Erald Carlson Arrell Kammer reg Schaeter I Hied Wathins Jarew Curron | Street or PO Address Street or PO Address 1615-12D AveRd. Stet 215 E Hawaii 1603-1200 AveRd. 1615-1200 AveRd. 3719 Cliffon Way 1603-1200 Ave Rd. 3719 Cliffon Way 1603-1200 Ave Rd. 215 E Hawaii 8510 Gernstone CH 5606 Plymouth St 14204 Wilcowis Ln 14500 Wilcowis Ln 14500 Wilcowis Ln 14500 Wilcowis Ln | Nampo Nampo Nampo Nampo Nampo | RUBUEL B | Country Postal Code 83686 83686 83686 83686 83686 83686 |
| 5. Organized Under the Law IDAHO C 71229 ssued 12/04/2007 by NLB | Signature: | print :: Gary Botimer | MD | | Date: 12/5/07 Title: Reg. Agent |

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors.Note: <u>Do not</u> put "same as last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.