

No. 89131	Idaho Corporation Annual Report Form		2. Registered Agent and Office																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 NO FEES REQUIRED SEC. OF STATE 89 JUL 21 PM 10 37	Due No Later Than November 1, 1989		FREDERICK T. SMOLE 721 LICK CREEK ROAD																									
	1. Mailing Address — Please Correct 89131 IDA-WA DENTAL LAB, INCORPORATED FREDERICK T. SMOLE BOX 766		MCCALL ID 83638																									
	MCCALL ID 83638		3. Incorporated Under The Laws of IDAHO NO: 89131																									
4. Names and Addresses of Officers and Directors																												
<table border="0"> <thead> <tr> <th></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Frederick T. Smole</td> <td>P.O. Box 766</td> <td>McCall</td> <td>Idaho</td> <td>83638</td> </tr> <tr> <td>Secretary:</td> <td>Barbara F. Smole</td> <td>P.O. Box 766</td> <td>McCall</td> <td>Idaho</td> <td>83638</td> </tr> <tr> <td>Directors:</td> <td colspan="5">Same As Above</td> </tr> </tbody> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	Frederick T. Smole	P.O. Box 766	McCall	Idaho	83638	Secretary:	Barbara F. Smole	P.O. Box 766	McCall	Idaho	83638	Directors:	Same As Above				
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5. Nature of Business		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.																										
Dental Lab		<table border="0"> <tr> <td>Signature</td> <td><i>Frederick T. Smole</i></td> <td>Date</td> <td>7-17-89</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>Frederick T. Smole</td> <td>Title</td> <td>President</td> </tr> </table>			Signature	<i>Frederick T. Smole</i>	Date	7-17-89	Name (Typed or Printed)	Frederick T. Smole	Title	President																
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