

No. C 120713

Due no later than August 31, 2008  
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

ALL VALLEY HOME HEALTH CARE, INC.  
GLEN AMADOR  
7456 W STATE  
BOISE, ID 83714GERREN RACCA  
7456 W STATE  
BOISE, ID 83703NO FILING FEE IF  
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

| <u>Office held</u> | <u>Name</u>    | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> |
|--------------------|----------------|-------------------------------|-------------|--------------|------------|
| President          | Glen Amador    | 7456 W. State St              | Boise       | ID           | 83714      |
| Secretary          | Tiffany Amador | 7456 W. State St              | Boise       | ID           | 83714      |
| Director           | John Probst    | 7456 W. State St              | Boise       | ID           | 83714      |

5. Organized Under the Laws of:

IDAHO  
C 120713

6.

Signature

Erin Nunes

Date

7/29/08

Name

(Typed or  
Printed)

Erin Nunes

Title

Bookkeeper

Issued 06/02/2008

Do Not Tape or Staple

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