

INSTRUCTIONS ON REVERSE SIDE

ISSUED: 07-04-1995

No. 62343	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX
Return To	Due No Later Than November 30, 1995	GALEN K. HAAS 163 23RD AVE.
Secretary of State 700 W Jefferson P.O. Box 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address -- Please Confirm If Not Correct GALEN K. HAAS, D.D.S., P.A. GALEN K. HAAS 1639 23RD AVE. LEWISTON ID 83501	LEWISTON ID 83501 3. Incorporated Under The Laws of ID NO: 62343

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>Postal Code</u>
President:	Galen K. Haas	1639 23rd Ave.	Lewiston	ID	83501
Secretary:	Maryann Haas				
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

Maryann Haas

Date

7/16/95

Name
(Typed or
Printed)

Maryann Haas

Title

Office Administrator