No. C 186743	Reinstatement Annual Report Form ADMIN DISSOLVED 06/07/2012	2. Registered Agent and Office (NOT A P.O. BOX)
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. PREHAB HEALTH AND PERFORMANCE P.A. STEVEN BAKER ~~2300 W. EVEREST LANE~~ ~~#175~~ ~~MERIDIAN ID 83646~~ 14 W. Franklin Rd Meridian ID 83642	STEVEN B BAKER ~~2300 W. EVEREST LANE~~ ~~#175~~ ~~MERIDIAN ID 83646~~ 14 W. Franklin Rd Meridian ID 83642 3. New Registered Agent Signature.
REINSTATEMENT FEE DUE: $30.00		

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

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
President/owner	Steven Baker	14 W. Franklin Rd	Meridian	ID	USA	83642

5. Organized Under the Laws of:	6.
IDAHO C 186743	Signature: [signature] Date: 2/27/13 Name (type or print): Steven Baker Title: Owner

Issued 02/19/2013 by CLH