| No. C 185821 | | Due no later than Jan 31, 2013 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|------------|---|------------------|---|-------|---------|-------------|
| Return to: | | | | SHANNON BLUTH | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | L. ANTOINE BLUTH, D.M.D., P.C. ANTOINE BLUTH 403 S 11TH ST #230 BOISE ID 83702 2915 W CALIPER CT EAGLE ID 83616 2915 W CALIPER CT EAGLE ID 83616 3. New Registered Agent Signature:* | | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 2000 | | ess Addresses of President, Secretary, and Directors. Tre | easurer (| | | _ | |
| Office Held | Name | Street or PO Address | | City | State | Country | Postal Code |
| PRESIDENT | ANTOINE BL | .UTH 403 S 11TH ST #230 | | BOISE | ID | USA | 83702 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID C 185821 | | Signature: Antoine Bluth | Date: 04/01/2013 | | | | |
| | | Name (type or print): Antoine Bluth | Title: Preident | | | | |
| Processed 04/01/201 | .3 | * Electronically provided signatures are accepted as orig | inal sign | atures. | | | |