

No. C 152299

Due no later than December 31, 2007
Annual Report Form

2. Registered Agent and Office NO PO BOX

SANDRA K PRESCOTT
1196 W 600 S
PINGREE, ID 83262

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

INTEGRATIVE MEDICAL TECHNOLOGIES, INC.
SANDRA K PRESCOTT
495 EMERALD AVE.
BLACKFOOT, ID 83221

NO FILING FEE IF
RECEIVED BY DUE DATE

3. 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	Sandra K Prescott	495 Emerald Ave.	Blackfoot	ID	83221

5. Organized Under the Laws of:
IDAHO
C 152299

6.

Signature

Sandra Prescott

Date

10/10/07

Name

(Typed or
Printed)

Sandra Prescott

Title

Owner

Issued 10/01/2007

Do Not Tape or Staple

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