

No. C 68289		Due no later than Nov 30, 2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. IWASA EYE CENTER, P.A. DANIEL E. IWASA 940 HUGHES DR PAYETTE ID 83661		DANIEL E IWASA 925 NW 12TH ST FRUITLAND ID 83619			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	DANIEL E IWASA	940 HUGHES DR	PAYETTE	ID	USA	83661	
SECRETARY	YVONNE IWASA	940 HUGHES DR	PAYETTE	ID	USA	83661	
5. Organized Under the Laws of: ID C 68289		6. Annual Report must be signed.* Signature: Daniel E. Iwasa Name (type or print): Daniel E. Iwasa					
		Date: 10/05/2009 Title: President					
Processed 10/05/2009		* Electronically provided signatures are accepted as original signatures.					