

No.

C 152843

Due no later than January 31, 2008

Annual Report Form

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

ORTHOPRO, INC.
762 NORTH COLLEGE RD STE A
TWIN FALLS, ID 83301

2. Registered Agent and Office NO PO BOX

MICHAEL JOHNSON
762 N COLLEGE RD STE A
TWIN FALLS, ID 83301

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.

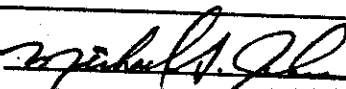
Office heldNameStreet or P.O. AddressCityStateZip

President Michael Johnson 762 North College Rd Ste A Twin Falls ID 83301

5. Organized Under the Laws of:
IDAHO
C 152843

6.

Signature



Date

11/14/07

Name (Typed or Printed)

Michael S Johnson

Title

President

Issued 11/01/2007

Do Not Tape or Staple

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