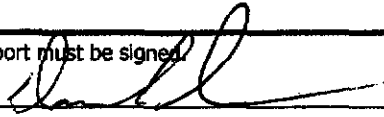
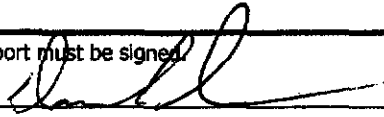
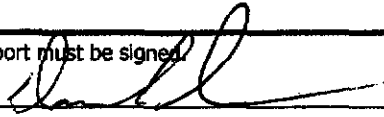


No. C 154219	Due no later than 4/30/2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)												
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		DAVID SWENSON 7790 N ATLAS RD COEUR D ALENE ID 83815												
	AMERICAN ANALYTICAL SERVICES, INC. MICHAEL K BRANSTETTER PO BOX 709 WALLACE ID 83873		3. <u>New</u> Registered Agent Signature:												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"><thead><tr><th>Office Held</th><th>Name</th><th>Street or PO Address</th><th>City</th><th>State</th><th>Zip</th></tr></thead><tbody><tr><td>CEO/President</td><td>David Swenson</td><td>59148 Silver Valley Rd</td><td>Osburn</td><td>ID</td><td>83849</td></tr></tbody></table>				Office Held	Name	Street or PO Address	City	State	Zip	CEO/President	David Swenson	59148 Silver Valley Rd	Osburn	ID	83849
Office Held	Name	Street or PO Address	City	State	Zip										
CEO/President	David Swenson	59148 Silver Valley Rd	Osburn	ID	83849										
5. Organized Under the Laws of: ID C 154219	6. Annual Report must be signed <table border="1"><tr><td>Signature: </td><td>Date: 03/20/09</td></tr><tr><td>Name(type or print): David Swenson</td><td>Title: CEO/President</td></tr></table>			Signature: 	Date: 03/20/09	Name(type or print): David Swenson	Title: CEO/President								
Signature: 	Date: 03/20/09														
Name(type or print): David Swenson	Title: CEO/President														