July 14, 1995

CARTER & RICHARDS, P.A. JAMES RICHARDS 2001 S WOODRUFF STE 3 IDAHO FALLS ID 83404

RE: CARTER AND RICHARDS, P.A. File Number C 77954

Dear Mr. Richards:

Please find enclosed your recently submitted annual report for the 1994-1995 fiscal year. We are unable to accept it in its present form. Please make the following correction(s) and return to this office.

You have stated that your corporation has gone out of business or is not transacting business in Idaho. The records of this office, however, do not indicate that the corporation has filed a formal dissolution.

If you wish to formally dissolve your corporation, you must comply with the requirements of Section 30-1-92, Idaho Code, by filing Articles of Dissolution in duplicate with this office along with the required statutory fee of \$30.00. The Articles of Dissolution should be filed before December 1, 1995 or an annual report filed by December 1, 1995 to avoid forfeiture.

If instead you wish to just allow the corporation to forfeit its right to do business in Idaho, then please disregard any subsequent annual report forms which you may receive and the corporation will be automatically forfeited on December 1, 1995.

If you have any questions or need further assistance, please do not hesitate to contact me at (208) 332-2816.

Very truly yours,

Tonya Herold Corporate Division

Enclosures: cited

INSTRUCTIONS ON REVERSE SIDE		
No. 77954	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX
Return To	Due No Later Than November 395	STEPHEN J. CARTER, M.D. 2001 S. HOODRUFF, #3
Secretary of State 700 W Jefferson P.O. Box 83720 Bolse, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	1 Maing Address - Parse Connert of Rot Conner CARTER AND BICHARDS, P.A. STEPHEN J. CARTER, M.D. 2001 S. WOODRUFF, STE. 3 IDAHO FALLS ID 83404	IDAHO FALLS ID 83404 3. Incorporated Under The Laws of ID NO: 77954
4. Names and Addresses of O	fficers and Directors Name Street or P.O. Address	City State Postal Code
President: No 1.c Secretary: Directors:	nger an active corporation as of	07/01/1995
5. Nature of Business	6. I certify that this Annual Report has been examined by complete.	me and is to the best of my knowledge true, correct and
	Name (Typed or Prinket)	Title Director