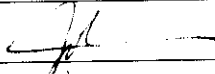


No. C 136843	Due no later than December 31, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX JOHN W MORRISON DMD 2301 WEST A STE A MOSCOW, ID 83843												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable PALOUSE ORAL & MAXILLOFACIAL SURGER 2301 WEST A ST STE A MOSCOW, ID 83843		3. <u>New</u> Registered Agent Signature												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.															
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;"><u>Office held</u></th> <th style="text-align: left; width: 20%;"><u>Name</u></th> <th style="text-align: left; width: 35%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>John W Morrison</td> <td>2301 West A street, Suite A</td> <td>Moscow</td> <td>ID</td> <td>83843</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President	John W Morrison	2301 West A street, Suite A	Moscow	ID	83843
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
President	John W Morrison	2301 West A street, Suite A	Moscow	ID	83843										
5. Organized Under the Laws of: IDAHO C 136843		6. Signature  Date <u>10/25/05</u> Name (Typed or Printed) <u>John W Morrison</u> Title <u>President</u>													

Issued 10/03/2005

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