

|                                                                                         |                                                                                                       |  |                                                                              |  |
|-----------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------|--|
| No. <b>44240</b>                                                                        | <b>Idaho Corporation Annual Report Form</b>                                                           |  | 2. Registered Agent and Office                                               |  |
| Return To<br><br><b>Secretary of State<br/>Room 203, Statehouse<br/>Boise, ID 83720</b> | <i>Due No Later Than November 1, 1990</i>                                                             |  | <b>M. J. SHARP, M.D.<br/>240 N. 18TH AVE.<br/><br/>POCATELLO ID 83201 36</b> |  |
|                                                                                         | 1. Mailing Address — <i>Please Correct</i>                                                            |  |                                                                              |  |
|                                                                                         | <b>M. J. SHARP, M.D., P.A.<br/>MERRILL J. SHARP, M.D.<br/>240 NO. 18TH<br/><br/>POCATELLO ID 3201</b> |  |                                                                              |  |
| NO FEE REQUIRED                                                                         |                                                                                                       |  | 3. Incorporated Under The Laws<br>of <b>ID</b><br><br><b>NO: 044240</b>      |  |

## 4. Names and Addresses of Officers and Directors

|            | <u>Name</u>       | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> |
|------------|-------------------|-------------------------------|-------------|--------------|------------|
| President: | M. J. Sharp, M.D. | 240 North 18th ave.           | Pocatello,  | ID           | 83201      |
| Secretary: | Winnie H. Sharp   | 330 South 7th Ave.            | Pocatello,  | ID           | 83201      |
| Directors: | M. J. Sharp, M.D. | 330 South 7th Ave.            | Pocatello   | ID           | 83201      |

## 5. Nature of Business

Medical

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name (Typed or Printed)**M. J. Sharp, M.D.**

Date

**91.JL.24**

Title

**President**