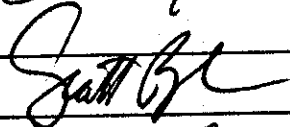


| | | |
|---|--|--|
| No. C 149219 | Due no later than May 31, 2007 Annual Report Form | 2. Registered Agent and Office NO PO BOX |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | 1. Mailing Address - Correct in this box, if applicable SCOTT M. BLAKE, D.D.S., P.C. 333 S WOODRUFF AVE IDAHO FALLS, ID 83401 |

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

| <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> |
|--------------------|--------------------------|-------------------------------|-------------|--------------|------------|
| Pres | SCOTT M BLAKE DDS, PC | 333 S Woodruff Ave | IDAHO FALLS | ID | 83401 |

All Same / NO Change

| | |
|---|--|
| 5. Organized Under the Laws of: IDAHO C 149219 | 6. Signature  Name (Typed or Printed) SCOTT Blake DDS Date 3-8-07 Title Pres |
|---|--|