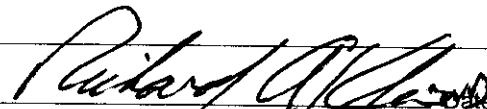


No. C 70218	Due no later than Jun 30, 2003 Annual Report Form		2. Registered Agent and Office NO PO BOX												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box if applicable		RICHARD A. KLEIN, M.D. 1512 12TH AVE RD NAMPA, ID 83686												
	RICHARD A. KLEIN, M.D., P.A. RICHARD A. KLEIN, M.D. PO BOX 938 NAMPA, ID 83653 0938		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><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>PRES. SECY. DIR.</td> <td>RICHARD A KLEIN MD</td> <td>PO BOX 938</td> <td>NAMPA</td> <td>ID</td> <td>83653</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>	PRES. SECY. DIR.	RICHARD A KLEIN MD	PO BOX 938	NAMPA	ID	83653
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
PRES. SECY. DIR.	RICHARD A KLEIN MD	PO BOX 938	NAMPA	ID	83653										
5. Organized Under the Laws of: IDAHO C 70218	6. Signature  9 APR 03 Name (Typed or Printed) RICHARD A. KLEIN MD Title PRES														