No. 47427	INSTRUCTIONS ON REVERSE SIDE  Idaho Corporation Annual Report Form		2. Registered Agent and Office		
Return To	Due No Later Than November 1, 1990  1. Mailing Address — Please Correct  STEVEN M. BRUCE, D.M.D., P. STEVEN M. BRUCE 1212 NORTH COLE ROAD		STEVEN M. BRUCE 1212 NORTH COLE ROAD		
					Secretary of State Room 203, Statehouse Boise, ID 83720
Boise, iD 63720			3. Incorporated Under The Laws of ID		
NO FEE REQUIRED			BOISE	ID 83704	NO: 067627
4. Names and Addresses of Office	ers and Directors				
	<u>Name</u>	Street or P.O. Address	<u>City</u>	State Zip	
President: STEVEN M. B Secretary: BRENDA BRUC		PRING MOUNTAIN DR. PRING MOUNTAIN DR.	BOISE, IDAHO BOISE, IDAHO		
Directors:					
5. Nature of Business	6. I certify t	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.			
DENTISTRY		Atteven M. Bus	Date 7,	/10/90	
	Name (Typed Printed	Steven M. Bruce	Title Co.	rp. President	