No. C 194679	Due no later than May 31, 2014	2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form 1. Mailing Address: Correct in this box if needed. DENT-O-NATOR INC. (THE) KIRK W MATTILA PO BOX 1841 SANDPOINT ID 83864	KIRK MATTI 11537 NORT SANDPOINT	KIRK MATTILA 11537 NORTH BOYER RD SANDPOINT ID 83864 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Bu	siness Addresses of President, Secretary, and Directors. Treasure		- Cu / Igelie 3	ignature.		
Office Held Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT KIRK MATTILA 11537 NORTH BOYER RD		SANDPOINT	ID	USA	83864	
5. Organized Under the Laws of: OR C 194679	6. Annual Report must be signed.* Signature: Kirk Mattila Name (type or print): Kirk Mattila		Date: 07/07/2014 Title: President			
Processed 07/07/2014	* Electronically provided signatures are accepted as original signatures.					