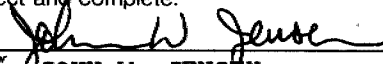
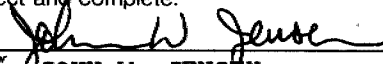
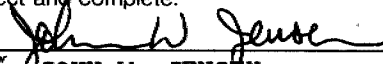


ISSUED: 07-05-1994

No. 99139	Idaho Corporation Annual Report Form Due No Later Than November 1, 1994		2. Registered Agent and Office JOHN W. JENSEN 3743 MICHELLE ST IDAHO FALLS ID 83401																									
Return To Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address — JENSEN ENTERPRISES, INC. JOHN W. JENSEN 3743 MICHELLE ST IDAHO FALLS ID 83401		3. Incorporated Under The Laws of ID NO: 99139																									
	4. Names and Addresses of Officers and Directors																											
<table border="1"> <thead> <tr> <th></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>President:</td> <td>JOHN W. JENSEN</td> <td>3743 Michelle St.</td> <td>Idaho Falls,</td> <td>ID</td> <td>83401</td> </tr> <tr> <td>Secretary:</td> <td>SAME AS ABOVE</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Directors:</td> <td>None</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	JOHN W. JENSEN	3743 Michelle St.	Idaho Falls,	ID	83401	Secretary:	SAME AS ABOVE					Directors:	None				
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Secretary:	SAME AS ABOVE																											
Directors:	None																											
5. Nature of Business Medical Sales	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="1"> <tr> <td>Signature</td> <td></td> <td>Date</td> <td>7/28/94</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>JOHN W. JENSEN</td> <td>Title</td> <td>Pres.</td> </tr> </table>				Signature		Date	7/28/94	Name (Typed or Printed)	JOHN W. JENSEN	Title	Pres.																
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