No. W 5470	Due no later than Feb 28, 2001	Registered Agent and Office NO PO BC
Return to:	Annual Report Form	TROY PERKINS
SECRETARY OF STATE	 Mailing Address - Correct in this box, if applicable 	1350 6TH AVE E
700 WEST JEFFERSON	MAGIC VALLEY BIOMEDICAL L.L.C.	
PO BOX 83720	TROY PERKINS 1350 6TH AVE E	TWIN FALLS, ID 83301
BOISE, ID 83720-0080	1350 61H AVE E	
	TWIN FALLS, ID 83301	3. New Registered Agent Signature
NO FILING FEE IF	7777777220, 15 3300.	
RECEIVED BY DUE DATE		
•	panies: Enter Names and Addresses of Members.	
Office held Name	Street or P.O. Address	<u>City State Zip </u>
Mangging Member Tr	Street or P.O. Address by Perkins 1350 674 Ave C To	Cin Falls II 83301
Mangging Member Tr	by Perkins 1350 GTA Ave E To	Cin Falls IS 83301
Managing Member Tr		
5. Organized Under the Laws of	f: 6. Signature	Date _//8/01
	f: 6.	