

No. 02343	<input checked="" type="checkbox"/> Idaho Corporation Annual Report Form Due No Later Than November 1, 1988		2. <input checked="" type="checkbox"/> Registered Agent and Office GALEN K. HAAS 163 23RD AVE. LEWISTON, ID 83501																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 18 OCT 21 AM 8 35	1. Mailing Address — Please Correct 062343		3. Incorporated Under The Laws ENTERED of STATE OF IDAHO OCT 21 1988																									
	GALEN K. HAAS, D.O.S., P.A. GALEN K. HAAS 1639 23RD AVE. LEWISTON, ID 83501																											
4. Names and Addresses of Officers and Directors																												
<table border="0"> <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>GALEN K HAAS</td> <td>826 Warner Ave</td> <td>LEWISTON</td> <td>ID</td> <td>83501</td> </tr> <tr> <td>Secretary:</td> <td>MARJANN HAAS</td> <td>" " "</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Directors:</td> <td colspan="5">SAME AS ABOVE</td> </tr> </tbody> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	GALEN K HAAS	826 Warner Ave	LEWISTON	ID	83501	Secretary:	MARJANN HAAS	" " "	"	"	"	Directors:	SAME AS ABOVE				
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Directors:	SAME AS ABOVE																											
5. Nature of Business DENTAL		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="0"> <tr> <td>Signature</td> <td><i>Galen K Haas</i></td> <td>Date</td> <td>10/18/88</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>GALEN K HAAS</td> <td>Title</td> <td>President</td> </tr> </table>			Signature	<i>Galen K Haas</i>	Date	10/18/88	Name (Typed or Printed)	GALEN K HAAS	Title	President																
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