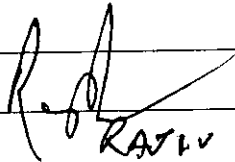


No. W 18186	Due no later than Feb 28, 2003 Annual Report Form		2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box if applicable		RAJIV RAJ 6090 N QUEENSBURY PL
	MED-FLOW L.L.C. 6090 N QUEENSBURY PL BOISE, ID 83713		BOISE, ID 83713
3. <u>New</u> Registered Agent Signature			
4. Limited Liability Companies: Enter Names and Addresses of Members.			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>
	MANAGING MEMBER RAJIV RAJ	6090 N. Queensbury Pl.	Boise ID 83713
5. Organized Under the Laws of: IDAHO W 18186	6. Signature  Date <u>3/15/03</u> Name (Typed or Printed) <u>RAJIV RAJ</u> Title <u>MAN. MEMBER</u>		