

No. C 64203	Annual Report Form 1996 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX HERMAN T. SAKIMOTO, DDS 1207 SOUTH KIMBALL CALDWELL ID 83605
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED ** FINAL NOTICE **	1. Mailing Address - Please Correct, If Not Correct HERMAN T. SAKIMOTO, D.D.S., HERMAN T. SAKIMOTO, DDS 1207 SOUTH KIMBALL CALDWELL ID 83605		3. Organized Under the Laws of: ID C 64203

4. Corporations: Enter Names and Addresses of **President, Secretary and Directors**
 Limited Liability Companies: Enter Names and Addresses of ☐ **Managers** or ☐ **Members** (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
President:	Herman T. Sakimoto	1207 S. Kimball Ave.	Caldwell	ID.	83605
Secretary:	Ardyce H. Sakimoto	1207 S. Kimball Ave.	Caldwell	ID.	83605
Directors:	Herman T. Sakimoto	1207 S. Kimball Ave.	Caldwell	ID.	83605

5. NATURE OF BUSINESS ORTHODONTICS	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Herman T. Sakimoto</u> Date <u>10/19/96</u> Name (Typed or Printed) <u>HERMAN T. SAKIMOTO</u> Title <u>Pres.</u>
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ISSUED: 10-05-1996

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