

No. W 52964

Due no later than July 31, 2007
Annual Report Form

2. Registered Agent and Office NO PO BOX

RUTH STEVENS PIERCE
589 SHOUP AVE WEST
TWIN FALLS, ID 83301

320 Main Ave. North

3. New Registered Agent Signature

Return to:
SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

NO FILING FEE IF
RECEIVED BY DUE DATE

1. Mailing Address - Correct in this box, if applicable

CATALYST MEDICAL SERVICES NORTHWEST
PO BOX 172
TWIN FALLS, ID 83301

4. Limited Liability Companies: Enter Names and Addresses of Members.

Office held

Name

Street or P.O. Address

City

State

Zip

Member

Jake Hayes

589 Shoup Ave. W.

Twin Falls, ID

83301

member

Impulse LLC

PO Box 172

Twin Falls, ID

83303-0172

5. Organized Under the Laws of:

IDAHO
W 52964

6.

Signature

Name

Typed or
Printed

Impulse, LLC. by

Date

5/25/07

Title

Member