| | | INSTRUCTION | ONS ON REVERS | E SIDE | | | | |
|---|----------------|--|-----------------------------------|--------------------|-------|--|----------|----------------|
| No. 53905 | | Idaho Corporation Annual Report Form | | | 2. Re | 2. Registered Agent and Office NOT A P.O. BOX | | |
| Return To Secretary of State Room 203, Statehouse Boise, ID 83720 | | Due No Later Than November 1, 1991 | | | | C T CORPORATION SYSTEM | | |
| | | 1: Mailing Address — Please Correct, If Not Correct | | | 3,0 | # 300 NORTH 6TH STREET # POISE ID 93701 3. Incorporated Under The Laws of AZ | | |
| | | USA HEALTHNET, INC. ADELE FRENCH 7301 NORTH 16TH STREET, # | | 3. Inc | | | | |
| NO FEE REGI | | PHOENIX | AZ 85 | 020 | NO | : 083905 | | |
| 4. Names and Address | es of Officers | | | | | | | |
| | | Name | Street or P.O. | <u>Address</u> | | City | State | <u>Zio</u> |
| President: | | K. Howland | | 16th St | | Phx | AZ | 85020 |
| Secretary: | _ | K. Hinson | | 16th St | | Phx | AZ | 85020 |
| Directors: | | E. Bogle hael Bogle | | 16th St 16th St | | Phx Phx | AZ AZ | 85020 85020 |
| | | | e superior de | | | | | |
| | | | | | · | | | |
| 5. Nature of Business Contracting care provid | | ealth true, correct | this Annual Repo and complete. | rt has been ex | ed. | y me and is to the | • | 11-91 |