

No. 058941	Idaho Corporation Annual Report Form		2. Registered Agent and Office																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 RECEIVED SEC. OF STATE 87 JUL 16 AM 10:08	Due No Later Than November 1, 1987		LEO R. BROWN, M.D. 1218 9TH STREET, N. SUITE 7 RUPERT, IDAHO 83350 JUL 24 1987																									
	1. Mailing Address — Please Correct 058941 RUPERT MEDICAL - SURGICAL GROUP, LEO R. BROWN, M.D. 1218 9TH STREET, #7 RUPERT, IDAHO 83350				3. Incorporated Under The Laws of STATE OF IDAHO																							
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th></th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Leo R Brown</td> <td>1218 9th St #7</td> <td>Rupert</td> <td>ID</td> <td>83350</td> </tr> <tr> <td>Secretary:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						Name	Street or P.O. Address	City	State	Zip	President:	Leo R Brown	1218 9th St #7	Rupert	ID	83350	Secretary:						Directors:					
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President:	Leo R Brown	1218 9th St #7	Rupert	ID	83350																							
Secretary:																												
Directors:																												
5. Nature of Business Medical Doctor		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>Leo R Brown</u> Date <u>7/14/87</u> Name (Typed or Printed) <u>Leo R Brown</u> Title <u>President</u>																										

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