

No. C 120713

Due no later than August 31, 2007  
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

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

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

ALL VALLEY HOME HEALTH CARE, INC.  
GLEN AMADOR  
7456 W STATE  
BOISE, ID 83714GERREN RACCA  
7456 W STATE  
BOISE, ID 83703NO FILING FEE IF  
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Glen Amador	7456 W State St	Boise	ID	83714
Secretary	Tiffany Amador	7456 W State St	Boise	ID	83714
Director	Jennifer flowers	7456 W. State St	Boise	ID	83714

5. Organized Under the Laws of:  
IDAHO  
C 120713

6.

Signature

Erin Nunes

Date

6/21/07

Name (Typed or Printed)

Erin Nunes

Title

Bookkeeper

Issued 06/01/2007

Do Not Tape or Staple

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