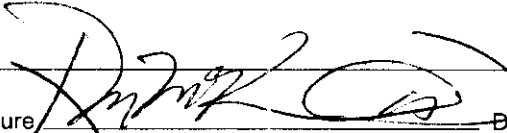


<b>No. C 133269</b>	<b>Due no later than March 31, 2004</b> <b>Annual Report Form</b>	2. Registered Agent and Office <b>NO PO BOX</b>  MARK K MCKAIN 235 MARTIN  TWIN FALLS, ID 83301
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address - Correct in this box, if applicable  MARK K. MCKAIN, M.D., P.A. MARK K MCKAIN 235 MARTIN  TWIN FALLS, ID 83301	3. <u>New</u> 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	Mark K. McKain	253 Martin St.	Twin Falls	Idaho	83301
Vice President	Mark K. McKain	253 Martin St.	Twin Falls	Idaho	83301
Secretary	Margaret McKain	253 Martin St.	Twin Falls	Idaho	83301

5. Organized Under the Laws of:  <div style="text-align: center;">IDAHO C 133269</div>	6.  Signature _____ Date <u>1/12/04</u>  Name <small>(Typed or Printed)</small> <u>Mark K. McKain, M.D., P.A.</u> Title <u>President</u>
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