

No. 67499	Idaho Corporation Annual Report Form Due No Later Than November 1, 1989	2. Registered Agent and Office
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 RECEIVED SEC. OF STATE NO FEE REQUIRED 89 SEP 20 AM 9 02		1. Mailing Address — Please Correct 67499 HOLLEN J. HILLER, D.D.S., PROFES HOLLEN J. HILLER, D.D.S. 1820 E. 17TH ST, SUITE 330 IDAHO FALLS ID 83401

4. Names and Addresses of Officers and Directors

<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President: Hollen J. Hiller, D.D.S.	280 Hartert	Idaho Falls, Idaho		83404
Secretary: Donna Hiller	280 Hartert	Idaho Falls, Idaho		83404
Directors: Hollen J. Hiller, D.D.S.	280 Hartert	Idaho Falls, Idaho		83404

5. Nature of Business

Dental Practice

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	<i>Hollen J. Hiller, DDS</i>	Date	9-18-89
Name (Typed or Printed)	HOLLEN J. HILLER, DDS	Title	President