No. C 119651		Due no later than May 31, 2013		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		202 CHI CHI A	KARLAN JENSEN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. KJ MEDICAL, INC. KENT T JENSEN 615 FILER AVE TWIN FALLS ID 83301 USA		N	202 GULCH LN TWIN FALLS ID 83301			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registere	3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).								
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
	SARAH BESS JUND KENT T JENSEN		1227 LAWNDALE 202 GULCH LANE	TWIN FALLS TWIN FALLS,	ID ID	USA USA	83301 83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 119651		Signature: Kent Jensen			Date: 06/11/2013			
		Name (type or print): Kent Jensen			Title: Pres			
Processed 06/11/2013 * Electronically provided signatures are accepted as original signatures.								