

<b>No. C 117880</b>	<b>Due no later than January 31, 2005</b> <b>Annual Report Form</b>	2. Registered Agent and Office <b>NO PO BOX</b>  JOHN T MITCHELL 101 IRONWOOD DR STE 218 COEUR D'ALENE, ID 83814																		
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>	<b>1. Mailing Address - Correct in this box, if applicable</b>  DENTAL LAB SERVICES, INC. PO BOX 2075 HAYDEN, ID 83835 2075	3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>JOHN T. MITCHELL</td> <td>P.O. Box 2075</td> <td>HAYDEN</td> <td>ID</td> <td>83835</td> </tr> <tr> <td>VICE-PRES SECRETARY</td> <td>DOUG W. JONES</td> <td>P.O. Box 2075</td> <td>HAYDEN</td> <td>ID</td> <td>83835</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	PRESIDENT	JOHN T. MITCHELL	P.O. Box 2075	HAYDEN	ID	83835	VICE-PRES SECRETARY	DOUG W. JONES	P.O. Box 2075	HAYDEN	ID	83835
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5. Organized Under the Laws of:  IDAHO C 117880	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Signature _____</td> <td style="width: 40%;">Date _____</td> </tr> <tr> <td>Name <small>(Typed or Printed)</small> JOHN T. MITCHELL</td> <td>Title PRESIDENT</td> </tr> </table>		Signature _____	Date _____	Name <small>(Typed or Printed)</small> JOHN T. MITCHELL	Title PRESIDENT														
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