

No. 068299	Idaho Corporation Annual Report Form		2. Registered Agent and Office																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 RECEIVED SECRETARY OF STATE SEP 8 AM 9 01	Due No Later Than November 1, 1988		DONALD D. RAE 1149 WEST BOISE AVE BOISE, IDAHO 83706																									
	1. Mailing Address — Please Correct 068299																											
	BROADWAY CHIROPRACTIC CENTER, PA DONALD D. RAE 1149 WEST BOISE AVE. BOISE, IDAHO 83706		3. Incorporated Under The Laws of STATE OF IDAHO ENTERED SEP 08 1988																									
4. Names and Addresses of Officers and Directors																												
<table border="1"> <thead> <tr> <th></th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>DONALD D. RAE</td> <td>128 DOVER LN.</td> <td>BOISE</td> <td>IDAHO</td> <td>83705</td> </tr> <tr> <td>Secretary:</td> <td>MARGARET ANN RAE</td> <td>128 DOVER LN.</td> <td>BOISE</td> <td>IDAHO</td> <td>83705</td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						Name	Street or P.O. Address	City	State	Zip	President:	DONALD D. RAE	128 DOVER LN.	BOISE	IDAHO	83705	Secretary:	MARGARET ANN RAE	128 DOVER LN.	BOISE	IDAHO	83705	Directors:					
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Secretary:	MARGARET ANN RAE	128 DOVER LN.	BOISE	IDAHO	83705																							
Directors:																												
5. Nature of Business HEALTH CHIROPRACTIC SERVICE		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="1"> <tr> <td>Signature</td> <td>Margaret Ann Rae</td> <td>Date</td> <td>8-31-88</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>MARGARET ANN RAE</td> <td>Title</td> <td>SECRETARY</td> </tr> </table>			Signature	Margaret Ann Rae	Date	8-31-88	Name (Typed or Printed)	MARGARET ANN RAE	Title	SECRETARY																
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