No. C 154886				2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			THOMAS D MCKIM MD 900 N LIBERTY STE 300 BOISE ID 83704			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. ADA PLASTIC AND RECONSTRUCTIVE SURGERY, INC. THOMAS D MCKIM 900 N LIBERTY STE 300 BOISE ID 83704						
					3. New Registered Agent Signature:*			
				3. <u>INEW</u> Registe	13. INEW Registered Agent Signature.			
RECEIVED BY DUE DATE								
4. Corporations: Enter N	lames and Busir	ness Addresses o	of President, Secretary, and Directors. Treasu	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	THOMAS D	MCKIM	900 N LIBERTY ST STE 300	BOISE	ID	USA	83704	
		1						
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 154886		Signature:	Thomas McKim		Date: 03/16/2009			
		Name (type	or print): Thomas McKim		Title: President			
Processed 03/16/2009		* Electronically provided signatures are accepted as original signatures.						