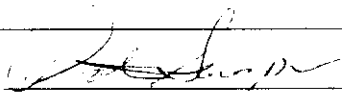
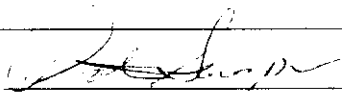
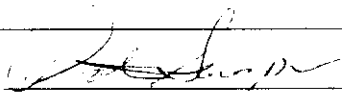


No. C 104562	Due no later than Dec 31, 2000 Annual Report Form	2. Registered Agent and Office NO PO BOX PATRICIA SARAS 2285 ADDISON AVE EAST TWIN FALLS, ID 83301																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable ADDISON ANIMAL CLINIC, P.A. PATRICIA SARAS 2285 ADDISON AVE EAST TWIN FALLS, ID 83301	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; margin-top: 10px;"> <thead> <tr> <th style="text-align: left; width: 15%;"><u>Office held</u></th> <th style="text-align: left; width: 25%;"><u>Name</u></th> <th style="text-align: left; width: 30%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 15%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Pres.</td> <td>Patricia Saras</td> <td>1160 Florence</td> <td>Twin Falls,</td> <td>Id</td> <td>83301</td> </tr> <tr> <td>Sec/Tre.</td> <td>Cindy Brennan</td> <td>548 5th Ave, West</td> <td>Twin Falls,</td> <td>Id</td> <td>83301</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>	Pres.	Patricia Saras	1160 Florence	Twin Falls,	Id	83301	Sec/Tre.	Cindy Brennan	548 5th Ave, West	Twin Falls,	Id	83301
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Sec/Tre.	Cindy Brennan	548 5th Ave, West	Twin Falls,	Id	83301															
5. Organized Under the Laws of: <div style="text-align: center;">IDAHO C 104562</div>	6. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 60%;">Signature </td> <td style="width: 40%;">Date <u>10-15-98</u></td> </tr> <tr> <td colspan="2">Title: _____</td> </tr> <tr> <td colspan="2">Name <small>(Typed or Printed)</small> <u>Patricia Saras</u></td> </tr> </table>		Signature 	Date <u>10-15-98</u>	Title: _____		Name <small>(Typed or Printed)</small> <u>Patricia Saras</u>													
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