

No. C 68289		Due no later than November 30, 2006 Annual Report Form		2. Registered Agent and Office NO PO BOX		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address - Correct in this box, if applicable PAYETTE VISION CLINIC, P.A. DANIEL E IWASA 915 THIRD AVE N PAYETTE, ID 83661		DANIEL E IWASA 915 THIRD AVENUE NORTH PAYETTE, ID 83661		
NO FILING FEE IF RECEIVED BY DUE DATE				3. New Registered Agent Signature		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.						
Office held	Name	Street or P.O. Address	City	State	Zip	
President	Daniel Iwasa	915 3rd AVE N	Payette	ID	83661	
Secretary	Yvonne Iwasa	915 3rd AVE N	Payette	ID	83661	
5. Organized Under the Laws of: IDAHO C 68289		6. Signature _____ Name (Typed or Printed) Daniel E Iwasa		Date 10/9/06	Title President	

Issued 09/01/2006

Do Not Tape or Staple

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