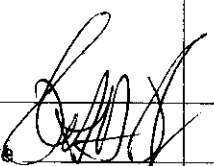


No. <b>C 79419</b>	<b>Due no later than Sep 30, 2000</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address - Correct in this box, if applicable		JOHN H. MUTO, O.D. 1175 W. BOISE AVENUE  BOISE, ID 83706																			
	IDAHO EYECARE CENTER, P.A.  1175 W. BOISE AVENUE  BOISE, ID 83706																					
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th>Office held</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>John H. Muto, O.D.</td> <td>1175 W. Boise Avenue</td> <td>Boise</td> <td>ID</td> <td>83706</td> </tr> <tr> <td>Secretary</td> <td>Mary Ann Muto</td> <td>SAME AS ABOVE</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	President	John H. Muto, O.D.	1175 W. Boise Avenue	Boise	ID	83706	Secretary	Mary Ann Muto	SAME AS ABOVE				3. <u>New</u> Registered Agent Signature	
Office held	Name	Street or P.O. Address	City	State	Zip																	
President	John H. Muto, O.D.	1175 W. Boise Avenue	Boise	ID	83706																	
Secretary	Mary Ann Muto	SAME AS ABOVE																				
5. Organized Under the Laws of:  IDAHO C 79419	6.  Signature  (Typed or Printed) <u>Mary Ann Muto</u> Name		Date <u>8-01-2000</u> Title: <u>Secretary</u> <del>Time</del> xxx																			

Issued 07/10/2000

**Do Not Tape or Staple**

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