No. **C 184836**	**Due no later than Oct 31, 2012** **Annual Report Form**	2. Registered Agent and Address **(NO PO BOX)**
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 needed.** AMANDA GALLEGOS, DMD, P.C. AMANDA GALLEGOS 704 N 17TH ST BOISE ID 83702	AMANDA GALLEGOS 704 N 17TH ST BOISE ID 83702 3. New Registered Agent Signature:*

4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
SECRETARY	DORA M GALLEGOS	311 E 38TH ST	GARDEN CITY	ID	USA	83714
PRESIDENT	AMANDA M GALLEGOS	704 N 17TH ST	BOISE	ID	USA	83702

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **C 184836**	Signature: Amanda Gallegos Name (type or print): Amanda Gallegos	Date: 10/09/2012 Title: Pres.

Processed 10/09/2012

* Electronically provided signatures are accepted as original signatures.