

No. <b>C 170965</b>	<b>Due no later than Jan 31, 2009</b> <b>Annual Report Form</b>	2. Registered Agent and Address <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>	<b>1. Mailing Address: Correct in this box if needed.</b> HEALX, INC. PETER J FALETTO PO BOX 1085 SANDPOINT ID 83864 USA	PETER J FALETTO 403 S 11TH #D COEUR D ALENE ID 83814
		3. <u>New</u> Registered Agent Signature:*
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).		
Office Held	Name	Street or PO Address
PRESIDENT	PETER J FALETTO	PO BOX 1085
City	State	Country
SANDPOINT	ID	USA
Postal Code	83864	
5. Organized Under the Laws of:  <b>ID C 170965</b>	6. Annual Report must be signed.* Signature: Peter J. Faletto Name (type or print): Peter J. Faletto Date: 02/23/2009 Title: President	
Processed 02/23/2009 * Electronically provided signatures are accepted as original signatures.		