No. C 167601	Due no later than Jun 30, 2008		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		the state of the s	JOHN A BOYAJIAN 357 E RIVER QUARRY DR EAGLE ID 83616 3. New Registered Agent Signature:*			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.		The second discount of the second				
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	SINUS SURGERY CENTER-IDAHO, P.A. JOHN A BOYAJIAN MD 357 E RIVER QUARRY DR						
NO FILING FEE IF	EAGLE ID 83616		3. <u>New</u> Registe				
RECEIVED BY DUE DATE							
4. Corporations: Enter Names and Busi	ness Addresses o	f President, Secretary, and Directors. Treas	urer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT JOHN A BOYAJIAN		357 E.RIVER QUARRY DR	EAGLE	ID	USA	83616	
SECRETARY CHRIS S E	OYAJIAN	357 E.RIVER QUARRY DR	EAGLE	ID	USA	83616	
DIRECTOR CRYSTAL E	SAISCH	357 E.RIVER QUARRY DR	EAGLE	ID	USA	83616	
5. Organized Under the Laws of: 6. Annual Rep		rt must be signed.*					
ID Signature: Jo		lohn A Boyajian Date: 07/07/2008					
C 167601 Name (type of		or print): John A Boyajian Title: President					
Processed 07/07/2008	* Electronically provided signatures are accepted as original signatures.						