

No. C 176415		Due no later than Dec 31, 2009		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. PROMESA HEALTH, INC. HEATHER CASEY PO BOX 3646 OMAHA NE 68103-0646 USA		CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702 USA		
				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	City	State	Country	Postal Code
DIRECTOR	SIDNEY FERENC	10805 OLD MILL RD	OMAHA	NE	USA	68154
DIRECTOR	JEFFREY SILVER	10805 OLD MILL RD	OMAHA	NE	USA	68154
DIRECTOR	STEVEN MENZIES	10805 OLD MILL RD	OMAHA	NE	USA	68154
TREASURER	STEVEN MENZIES	10805 OLD MILL RD	OMAHA	NE	USA	68154
PRESIDENT	STEVEN MENZIES	10805 OLD MILL RD	OMAHA	NE	USA	68154
SECRETARY	JEFFREY SILVER	10805 OLD MILL RD	OMAHA	NE	USA	68154
5. Organized Under the Laws of: NE C 176415		6. Annual Report must be signed.* Signature: Steven Menzies Name (type or print): Steven Menzies		Date: 12/02/2009 Title: President		
Processed 12/02/2009		* Electronically provided signatures are accepted as original signatures.				