

No. C 117880

Due no later than January 31, 2007
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

DENTAL LAB SERVICES, INC.
PO BOX 2075
HAYDEN, ID

JOHN T MITCHELL
101 IRONWOOD DR STE 218
COEUR D'ALENE, ID 83814

NO FILING FEE IF
RECEIVED BY DUE DATE

3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Owner	John T Mitchell	101 Ironwood Dr Ste 218	Coeur d'Alene	ID	83814

5. Organized Under the Laws of:
IDAHO
C 117880

6.

Signature

Date 12-15-06

Name

(Typed or
Printed)

Barbara Telheraw

Title

Bookkeeper