

No. C 113002

Due no later than December 31, 2007

Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

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

HARMEL DENTAL LABORATORY, INC.
MICHAEL HARMEL
9164 POPLAR
GIVENS HOT SPRINGS, ID 83641

MICHAEL HARMEL
9164 POPLAR
GIVENS HOT SPRINGS, ID 83641

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.

Office held	Name	Street or P.O. Address	City	State	Zip
President	Michael B HARMEL	9164 Poplar Dr	Givens Hot Springs	Ida	83641
Sec. / Treas.	MARCIA HARMEL	9164 Poplar Dr	Givens Hot Springs	Ida	83641

5. Organized Under the Laws of:
IDAHO
C 113002

6.

Signature

Marcia Harmel

Date

10-11-07

Name

(Typed or Printed)

MARCIA HARMEL

Title

Sec. / Treas.

Issued 10/01/2007

Do Not Tape or Staple

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