

INSTRUCTIONS ON REVERSE SIDE

ISSUED 07-06-1995

No. 78151	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX
Return To	Due No Later Than November 30, 1995	KRISTAN SPARKS 169 S. EMERSON
Secretary of State 700 W Jefferson P.O. Box 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address - Please Correct If Not Correct	
	KRISTAN SPARKS, O.D., P.A. KRISTAN SPARKS P.O. BOX 547 SHELLEY ID 83274	SHELLEY ID 83274 3. Incorporated Under The Laws of ID NO: 78151

4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Postal Code
President:	Kristan Sparks	P.O. Box 547	Shelley	Id.	83274
Secretary:	Kristan Sparks	P.O. Box 547	Shelley	Id.	83274
Directors:	Kristan Sparks	P.O. Box 547	Shelley	Id.	83274

5. Nature of Business

 Health Care -
 Optometric Practice

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name (Typed or Printed)

 Kristan Sparks
 Kristan Sparks

Date

10/09/95

Title

OWNER