

No. C 121094

Due no later than October 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

RANDY L. SORENSEN, D.M.D., P.A.
RANDY L SORENSEN
939 BRYDEN AVE
LEWISTON, ID 83501RANDY L SORENSEN
939 BRYDEN AVE
LEWISTON, ID 83501NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

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

Office heldNameStreet or P.O. AddressCityStateZip

President Randy L Sorensen 939 Bryden Ave Lewiston ID 83501
Secretary Lynda I Sorensen 939 Bryden Ave. Lewiston ID 83501

5. Organized Under the Laws of:

IDAHO
C 121094

6.

Signature

Date

8-13-07

Name (Typed or Printed)

RANDY L SORENSEN

Title

PRESIDENT