No. C 170571		Due no later than Dec 31, 2009		2. Register	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		MICHELL	MICHELE FERREIRA			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. BIOKINESYS, INC. MICHELE E. ANDERSON (FERREIRA) 5589 S JONQUIL BOISE ID 83716		BOISE 1	1246 E OAKRIDGE DR BOISE ID 83716 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Name	es and Busin	ess Addresses of Preside	nt, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	MICHELE E	ANDERSON (FERREIRA)	5589 S. JONQUIL PLACE	BOISE	ID	USA	83716	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Michele Anderson			Date: 12/23/2009			
C 170571		Name (type or print): Michele Anderson			Title: President			
Processed 12/23/2009 * Electronically provided signatures are accepted as original signatures.								