

No. **C 69356**Due no later than **March 31, 2006**

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

MIKE B. DINGMAN, D.D.S., P.A.

MIKE B DINGMAN

~~800 FALLS AVENUE, SUITE 8~~ 1186 Eastland Dr N, Suite A
TWIN FALLS, ID 83301

MIKE B DINGMAN

~~800 FALLS AVENUE, SUITE 8~~
TWIN FALLS, ID 83301

1186 Eastland Dr N, Suite A

3. New Registered Agent Signature

**NO FILING FEE IF
RECEIVED BY DUE DATE**

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

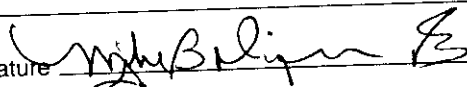
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Pres	Mike B Dingman	4138 N. Meadow Ridge Cir.	Twin Falls	Id	83301
Sec	Larry Braga	864 Filer Ave	Twin Falls	Id	83301
Dir	Mike B Dingman	4138 N. Meadow Ridge Cir.	Twin Falls	Id	83301

5. Organized Under the Laws of:

IDAHO
C 69356

6.

Signature



Date 1/18/06

Name (Typed or Printed)

Mike B Dingman DDS

Title

Pres

200603004149

Issued 01/04/2006

Do Not Tape or Staple