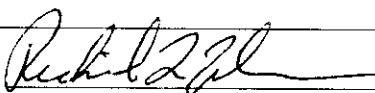
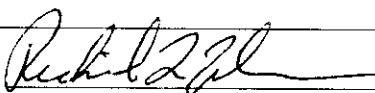
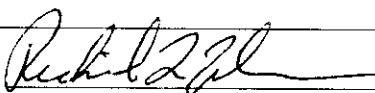


No. C 108116	Due no later than October 31, 2003 Annual Report Form	2. Registered Agent and Office NO PO BOX MICHAEL M MEGAARD 250 NORTHWEST BLVD STE 102 COEUR D'ALENE, ID 83814 2971
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address Correct in this box, if applicable RICHARD L. ZAHN, M.D., P.A. RICHARD L ZAHN 1315 S. PLEASANT VIEW RD POST FALLS, ID 83854	3. <u>New</u> Registered Agent Signature

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>
President	Richard Zahn	1315 S. Pleasant View	Post Falls	Id	83854

5. Organized Under the Laws of: IDAHO C 108116	6. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 60%; border-bottom: 1px solid black;"> Signature  </td> <td style="width: 40%; border-bottom: 1px solid black;"> Date 8/18/03 </td> </tr> <tr> <td style="border-bottom: 1px solid black;"> Name (Typed or Printed) Richard L Zahn </td> <td style="border-bottom: 1px solid black;"> Title President </td> </tr> </table>	Signature 	Date 8/18/03	Name (Typed or Printed) Richard L Zahn	Title President
Signature 	Date 8/18/03				
Name (Typed or Printed) Richard L Zahn	Title President				