

<b>No. W 9854</b>	<b>Due no later than Sep 30, 2002</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>NO PO BOX</b>												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE DATE</b>	1. Mailing Address - Correct in this box, if applicable  OPEN MRI ASSOCIATES, L.L.C.  <del>660 SHOSHONE STREET EAST</del> PO Box 1293  TWIN FALLS, ID 83301		G KENT TAYLOR 401 SECOND ST N STE 201  TWIN FALLS, ID 83301  3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table style="width: 100%; margin-top: 10px;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Managing member</td> <td>John Kee</td> <td>PO Box 1293</td> <td>Twin Falls</td> <td>ID</td> <td>83301</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Managing member	John Kee	PO Box 1293	Twin Falls	ID	83301
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
Managing member	John Kee	PO Box 1293	Twin Falls	ID	83301										
5. Organized Under the Laws of:  <div style="text-align: center;">IDAHO W 9854</div>		6. <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 50%;">Signature <u><i>John Kee</i></u></td> <td style="width: 50%;">Date <u>7-31-2002</u></td> </tr> <tr> <td>Name <small>(Typed or Printed)</small> <u>John Kee</u></td> <td>Title <u>Managing Member</u></td> </tr> </table>		Signature <u><i>John Kee</i></u>	Date <u>7-31-2002</u>	Name <small>(Typed or Printed)</small> <u>John Kee</u>	Title <u>Managing Member</u>								
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