

No. C 147914	Due no later than Feb 28, 2014 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
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 needed. ADVANCED MEDICAL SALES, INC. RALPH A ZIMMERMAN 711 DUNDEE DR POST FALLS ID 83854		RALPH A ZIMMERMAN 711 DUNDEE DR POST FALLS ID 83854			
			3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
SECRETARY	ANNABEL L ZIMMERMAN	711 DUNDEE DR.	POST FALLS	ID	USA	83854
5. Organized Under the Laws of: ID C 147914		6. Annual Report must be signed.* Signature: Ralph Zimmerman Name (type or print): Ralph Zimmerman		Date: 12/26/2013 Title: President		
Processed 12/26/2013		* Electronically provided signatures are accepted as original signatures.				