



## **Idaho Corporation Annual Report Form**

File online at: SOSBIZ.idaho.gov

Return completed form	within	30 (	days	to
Idaho Secretary of State				

	Due on/Before: 11/30/2	2018 Reporting Year:	2010	Idaho Secretary of State Attn: Annual Reports		
Annual Report: No filing fee if received by due date.				450 North 4th Street		
If reinstatement is required, the reinstatement fee is \$30.00.			1	e, ID 83702	<u> </u>	
Li Telliotato III				ne: (208) 334-2300		
SOS Control	Number: 215654	Filing Status: Active-Go	od Standing		ŗ	
Professional S	Service Corporation (D)	Date Formed: 11/03/19	81 Forr	mation Locale: ID	- E	
Name and Mailing Address: (1) A			(1) Add or Chan	ge Mailing Address:	_(	
IWASA EYE CENTER, P.A.					Ġ	
940 HUGHES	·				·	
PAYETTE, ID	83661				C	
Registered Agent (RA) and Registered Office (RO) Address:  DANIEL E IWASA  (2) 0			(2) Change RA	Change RA and/or RO Address:		
925 NW 12TH	H ST				į	
FRUITLAND,	ID 83619					
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	N.	lote: The Registered Office address n	uset ha an Idaha ad	rirese	i	
(3) Now Pogi			idot de un idune da	areas.		
(3) New Regi	stered Agent (RA) Sigr					
	= :	ppointed in item (2) above, the new ager				
	<del></del>	addresses (with zip code) of the Preside	nt, Vice President, So	<del></del>		
Title	Name	Business Address		City, State, Zip		
Secretary	Young I wash	925 N. O , Z16 S	<del>}</del>	FILITIMO ID 836/9		
	<u> </u>					
<u>'</u>						
<u> </u>				<u> </u>		
(5) Board of Dire	ectors names and business ad	dress (with zip code). Attach additional	sheet if necessary.			
Name		Business Address		City, State, Zip		
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				are o		
				<u></u>		
(5) Signature:	fr/4		(6) Date:	ls hs		
(7) Type/Print Na	ime: Doniel	Iguisa	(8) Title: Ras	dil		
Instructions: L	egibly complete the form above	ve. Enclose a check made payable to	the Idaho Secretary	of State for \$30 if reinstating.		
Sign and date tl	his form and return to the addr	ess provided above.				

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