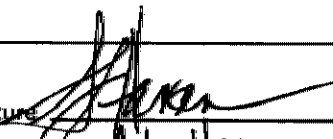
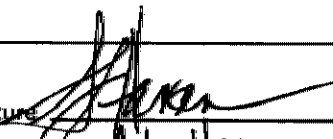
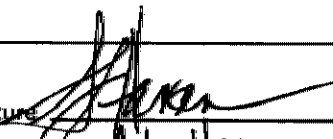


No. <b>W 1938</b>	<b>Annual Report Form 1999</b> <i>Due No Later Than November 30,</i>		2. Registered Agent and Office <b>NOT A P.O. BOX</b>																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>  <b>* FIRST NOTICE *</b>	1. Mailing Address - Please Correct, If Not Correct  <b>ROCK CREEK ENDOSCOPY CENTER,          TED L REA          284 MARTIN ST           TWIN FALLS ID 83301</b>		<b>IDAHO SERVICE COMPANY</b> <b>101 S CAPITOL BLVD 10TH</b>  <b>BOISE ID 83702</b>  3. Organized Under the Laws of:  <b>ID W 1938</b>																			
4. Corporations: Enter Names and Business Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)  <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Pres.</td> <td>Kent J. Smith</td> <td>284 Martin St. Ste*2</td> <td>Twin Falls</td> <td>ID</td> <td>83301</td> </tr> <tr> <td>V.P.</td> <td>Ted L. Rea</td> <td>same as above</td> <td></td> <td></td> <td></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>	Pres.	Kent J. Smith	284 Martin St. Ste*2	Twin Falls	ID	83301	V.P.	Ted L. Rea	same as above			
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V.P.	Ted L. Rea	same as above																				
5. Signature of New Registered Agent		6. <table border="0"> <tr> <td>Signature </td> <td>Date <b>11/12/99</b></td> </tr> <tr> <td>Name (Typed or Printed) <b>A.L. Hansen</b></td> <td>Title <b>Admin.</b></td> </tr> </table>			Signature 	Date <b>11/12/99</b>	Name (Typed or Printed) <b>A.L. Hansen</b>	Title <b>Admin.</b>														
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ISSUED: 07-03-1999

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