




No. 062789	<b>Idaho Corporation Annual Report Form</b> Due No Later Than November 1, 1987	2. Registered Agent and Office																								
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 SEC. OF STATE 87 JUL 14 AM 8 26	1. Mailing Address — Please Correct 062789	ARNOLD E. ALLEMAND #25 MERIDIAN MINI CENTER MERIDIAN, ID 83642																								
	QUALI-DENT DENTAL CLINICS, P.A. ARNOLD E. ALLEMAND #25 MERIDIAN MINI CENTER MERIDIAN, IDAHO 83642	3. Incorporated Under The Laws of STATE OF IDAHO																								
4. Names and Addresses of Officers and Directors																										
<table border="0"> <thead> <tr> <th></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>President:</td> <td>ARNOLD ALLEMAND</td> <td>25 MINI</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Secretary:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p style="text-align: center; font-size: 1.5em;">SAME AS ABOVE - NO CHANGES OVER PAST YEARS</p> <p style="text-align: right; font-weight: bold;">ENTERED JUL 23 1987</p>				<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	ARNOLD ALLEMAND	25 MINI				Secretary:						Directors:					
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President:	ARNOLD ALLEMAND	25 MINI																								
Secretary:																										
Directors:																										
5. Nature of Business DENTISTRY	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="0"> <tr> <td>Signature</td> <td></td> <td>Date</td> <td>JULY 12 87</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>ARNOLD E. ALLEMAND</td> <td>Title</td> <td>pres</td> </tr> </table>		Signature		Date	JULY 12 87	Name (Typed or Printed)	ARNOLD E. ALLEMAND	Title	pres																
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