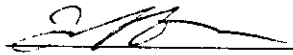


No. <b>C 121255</b>	<b>Due no later than October 31, 2005</b>		2. Registered Agent and Office <b>NO PO BOX</b>																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>Annual Report Form</b>		JEFF KLINE																			
	1. Mailing Address - Correct in this box, if applicable FAMILY DENTAL CENTER OF MOSCOW, P.C 2016 W PULLMAN RD STE C MOSCOW, ID 83843		2016 W PULLMAN RD STE C MOSCOW, ID 83843  3. <u>New</u> Registered Agent Signature																			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <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>President</td> <td>JEFF KLINE</td> <td>2016 W. Pullman Rd</td> <td>MOSCOW</td> <td>ID</td> <td>83843</td> </tr> <tr> <td>Secretary</td> <td>Dingel Kline</td> <td>"</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>	President	JEFF KLINE	2016 W. Pullman Rd	MOSCOW	ID	83843	Secretary	Dingel Kline	"	"	"	"
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Secretary	Dingel Kline	"	"	"	"																	
5. Organized Under the Laws of:  IDAHO C 121255		6. Signature  Date <u>11/5/05</u> Name (Typed or Printed) <u>JEFF KLINE</u> Title <u>President</u>																				

Issued 08/01/2005

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