INSTRUCTIONS ON REVERSE SIDE

No. 055974

Idaho Corporation Annual Report Form

Due No Later Than November 1, 1988

Return To

Secretary of State
Room 203, Statehouse
Boise, ID 83720

88 SEP 30 AM 8 58

1. Mailing Address — *Please Correct* 055974

STEVEN J. LARSEN, D.D.S., P.A.
STEVEN J. LARSEN
PO BOX 51358 1088 N. SKYLINE
IDAHO FALLS, IDAHO
83405

2. Registered Agent and Office

STEVEN J. LARSEN
1088 NORTH SKYLINE
IDAHO FALLS, IDAHO
83402

3. Incorporated Under The Laws of

STATE OF IDAHO

ENTER
SEP 30 1

4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Zip
President:	Steven J. Larsen	1088 N. Skyline Dr.	Idaho Falls	Idaho	83402
Secretary:					
Directors:					

5. Nature of Business

General 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.

X Signature Steven J. Larsen Date 9/28/88

Name (Typed or Printed) Steven J. Larsen Title President