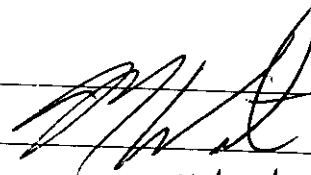


No. C 89800	Due no later than Jul 31, 2001 Annual Report Form		2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable ONCOLOGY-HEMATOLOGY SPECIALISTS, P. MALCOLM W. WINTER 428 6TH AVE LEWISTON, ID 83501		MALCOLM W. WINTER 511 SEVENTH AVE. LEWISTON, ID 83501 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>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>pres</td> <td>Malcolm Winter</td> <td>428 6th Ave</td> <td>Lewiston</td> <td>ID</td> <td>83501</td> </tr> <tr> <td>secretary</td> <td>Michael Rooney</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	pres	Malcolm Winter	428 6th Ave	Lewiston	ID	83501	secretary	Michael Rooney	"	"	"	"
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5. Organized Under the Laws of: IDAHO C 89800	6. Signature  Name (Typed or Printed) <u>MW Winter</u> Date <u>5/17/01</u> Title: <u>pres</u> XXXX																				

Issued 05/09/2001

Do Not Tape or Staple

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