No. <b>C 153801</b>		Due no later than Mar 31, 2014		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			STEVE WOOD			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  CARDIOGRIP IPH, INC.  STEVE WOOD  12554 W. BRIDGER ST. #108  BOISE ID 83713		12554 W. BRIDGER ST. #108 BOISE ID 83713  3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Nam	nes and Busin	ess Addresses of Pr	resident, Secretary, and Directors. Treasure	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	WILLIAM BOEGER		12554 W. BRIDGER ST. #108	BOISE	ID	USA	83713	
PRESIDENT	STEVE WOO	DD	12554 W. BRIDGER ST. #108	BOISE	ID	USA	83713	
DIRECTOR	DIRECTOR DAVE WOOL		12554 W. BRIDGER ST. #108	BOISE	ID	USA	83713	
DIRECTOR	RECTOR STINSON SL		12554 W. BRIDGER ST. #108	BOISE	ID	USA	83713	
DIRECTOR			12554 W. BRIDGER ST. #108	BOISE	ID	USA	83713	
DIRECTOR			12554 W. BRIDGER ST. #108	BOISE	ID	USA	83713	
SECRETARY	Y JOHN GRIFFITHS 12554 W. BRIDGER ST. #108 BOISE ID USA					83713		
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 153801		Signature: Steve Wood			Date: 01/29/2014			
		Name (type or print): Steve Wood			Title: Ceo			
Processed 01/29/2014 * Electronically provided signatures are accepted as original signatures.								