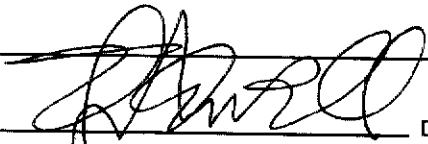


No. W 1688	Annual Report Form 1997 <i>Due No Later Than November 30,</i>	2. Registered Agent and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct NORTHERN LIGHTS DENTAL LABOR ERIC NEWELL 1750 E 17TH ST IDAHO FALLS ID 83404	ERIC NEWELL 1750 E 17TH ST IDAHO FALLS ID 83404
		3. Organized Under the Laws of: ID W 1688
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)		
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>
MANAGING PARTNER	ERIC NEWELL	1750 E 17TH ST
		<u>City</u> ID. FALLS
		<u>State</u> ID.
		<u>Zip</u> 83404
5. SIGNATURE OF CURRENT RA	6.  Signature _____ Date 7/17/97 Name (Typed or Printed) ERIC NEWELL Title MANAGING PARTNER	

ISSUED: 07-04-1997

↓ DO NOT TAPE OR STAPLE ↓

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