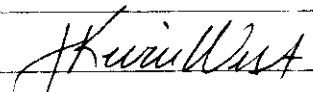


No. C 151423	Due no later than October 31, 2004 Annual Report Form		2. Registered Agent and Office NO PO BOX	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable ETO PODIATRY CLINIC, P.A. J KEVIN WEST 702 W IDAHO ST STE 700 BOISE, ID 83702		J KEVIN WEST 702 W IDAHO ST STE 700 BOISE, ID 83702	
			3. <u>New</u> Registered Agent Signature	

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Pres/Dir	Stanley G. Eto DPM	112 W. Logan St.	Caldwell	ID	83605
Secretary	Sharon K. Eto	112 W. Logan St.	Caldwell	ID	83605

5. Organized Under the Laws of: <div style="text-align: center;">IDAHO C 151423</div>	6. Signature  Date <u>8/10/04</u> Name <small>(Typed or Printed)</small> <u>J. Kevin West</u> Title <u>Corp. Attorney</u>
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