

No. <b>C 152196</b>		<b>Due no later than Dec 30, 2005</b>		<b>2. Registered Agent and Address (NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  EARTH-THERAPY, INC 329 S WOODRUFF IDAHO FALLS ID 83401 0000		STEPHANIE SHOEN ORR 3597 GROVE LN IDAHO FALLS ID 83404 0000			
				3. <u>New</u> Registered Agent Signature: *			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	STEPHANIE SCHOEN-ORR	3597 GROVE LANE	IDAHO FALLS	ID	USA	83404	
SECRETARY	STEPHANIE SCHOEN-ORR	3597 GROVE LANE	IDAHO FALLS	ID	USA	83404	
DIRECTOR	STEPHANIE SCHOEN-ORR	3597 GROVE LANE	IDAHO FALLS	ID	USA	83401	
5. Organized Under the Laws of:  <b>IDAHO C 152196</b>		6. Annual Report must be signed.* Signature: STEPHANIE SCHOEN-ORR Name (type or print): STEPHANIE SCHOEN-ORR Date: 10/19/2005 Title: PRESIDENT					
Processed 10/19/2005		* Electronically provided signatures are accepted as original signatures.					