

No. W 65796	Due no later than Aug 31, 2008 Annual Report Form		2. Registered Agent and Address (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 needed.		TERREL F TRANSTRUM 3341 CHIMNEY PEAK IDAHO FALLS ID 83404			
	SMB DENTAL, LLC TERREL F TRANSTRUM PO BOX 1742 IDAHO FALLS ID 83403-1742		3. <u>New</u> Registered Agent Signature: *			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	TERREL F TRANSTRUM	3341 CHIMNEY PEAK	IDAHO FALLS	ID	USA	83404
MANAGER	DAVID M TAYLOR	109 TOLLGATE PL	IDAHO FALLS	ID	USA	83404
5. Organized Under the Laws of: ID W 65796		6. Annual Report must be signed.* Signature: Terrel Transtrum Name (type or print): Terrel Transtrum Date: 06/15/2008 Title: Manager				
Processed 06/15/2008		* Electronically provided signatures are accepted as original signatures.				