

No. <b>C 118608</b>  Return to: <b>SECRETARY OF STATE</b> <b>700 WEST JEFFERSON</b> <b>PO BOX 83720</b> <b>BOISE, ID 83720-0080</b>  <b>NO FILING FEE IF</b> <b>RECEIVED BY DUE DATE</b>	<b>Due no later than March 31, 2007</b> <b>Annual Report Form</b> 1. Mailing Address - Correct in this box, if applicable <b>MATTHEWS CHIROPRACTIC, P.C.</b> <b>COREY MATTHEWS</b> <b>777 N 4TH ST</b> <b>BOISE, ID 83702</b>	2. Registered Agent and Office <b>NO PO BOX</b> <b>COREY MATTHEWS DC</b> <b>03 S 11TH STE 110</b> <b>BOISE, ID 83702</b>  3. New Registered Agent Signature												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President/owner</td> <td>Corey Matthews, DC</td> <td>403 S. 11th #110</td> <td>Boise</td> <td>Idaho</td> <td>83702</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	President/owner	Corey Matthews, DC	403 S. 11th #110	Boise	Idaho	83702
Office held	Name	Street or P.O. Address	City	State	Zip									
President/owner	Corey Matthews, DC	403 S. 11th #110	Boise	Idaho	83702									
5. Organized Under the Laws of: <b>IDAHO</b> <b>C 118608</b>	6. Signature <u>Corey Matthews DC</u> Date <u>1-5-07</u> Name (Typed or Printed) <u>Corey Matthews, DC</u> Title <u>Owner/President</u>													

Issued 01/02/2007

Do Not Tape or Staple

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