No. **C 193916**	**Due no later than Mar 31, 2015** **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.** FILIP E. ORBAN, D.D.S. P.A. FILIP E ORBAN 302 E CAMERON AVE KELLOGG ID 83837	FILIP E ORBAN 302 E CAMERON AVE KELLOGG 83837 3. New 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	FILIP E ORBAN	302 E CAMERON AVE	KELLOGG	ID	USA	83837

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **C 193916**	Signature: Filip E Orban	Date: 04/16/2015
	Name (type or print): Filip E Orban	Title: President

Processed 04/16/2015

* Electronically provided signatures are accepted as original signatures.