No. C 151580	Due no later than Nov 30, 2017	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	AMY L ROE 3253 S MCCORMICK WAY BOISE ID 83709 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. DENTAL CONCEPTS INC. TIM ROE 3253 S MCCORMICK WAY BOISE ID 83709				
NO FILING FEE IF RECEIVED BY DUE DATE	50.52 15 057.03				
4. Corporations: Enter Names and Busin	less Addresses of President, Secretary, and Directors. Treasurer ((optional).			
Office Held Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT TIMOTHY D	ROE 3253 S MCCORMICK WAY	BOISE	ID	USA	83709-3734
5. Organized Under the Laws of:	6. Annual Report must be signed.*				
ID	Signature: Timothy D Roe	Date: 11/30/2017			
C 151580	Name (type or print): Timothy D Roe	Title: President			
Processed 11/30/2017	* Electronically provided signatures are accepted as original sign	atures.			