

No. C 115595	Due no later than July 31, 2005 Annual Report Form	2. Registered Agent and Office NO PO BOX MIKE PETERSEN 1151 E FAIRVIEW MERIDIAN, ID 83642																		
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 applicable PET CARE CLINIC P.A. MIKE PETERSEN 1151 E FAIRVIEW MERIDIAN, ID 83642	3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: left; width: 15%;"><u>Office held</u></th> <th style="text-align: left; width: 25%;"><u>Name</u></th> <th style="text-align: left; width: 35%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Mike Petersen</td> <td>11399 E. Barker Rd</td> <td>Meridian</td> <td>Id</td> <td>83634</td> </tr> <tr> <td>Secretary</td> <td>Ida</td> <td>" " " " " "</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President	Mike Petersen	11399 E. Barker Rd	Meridian	Id	83634	Secretary	Ida	" " " " " "	"	"	"
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Secretary	Ida	" " " " " "	"	"	"															
5. Organized Under the Laws of: IDAHO C 115595	6. Signature <u>Mike Petersen</u> Date <u>5/9/06</u> Name (Typed or Printed) <u>Mike Petersen</u> Title <u>President</u>																			