

No. 91201	Idaho Corporation Annual Report Form Due No Later Than November 1,		2. Registered Agent and Office BRADLEY A. FOWLER 304 FERNAN ROAD P.O. Box 2434 COEUR D'ALENE ID 83814																					
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 ** FINAL NOTICE ** NO FEE REQUIRED	1. Mailing Address — Please Correct		3. Incorporated Under The Laws of ID NO: 091201																					
	MEDICAL COLLECTIONS, INC. BRADLEY A. FOWLER 304 FERNAN ROAD P.O. Box 2434 COEUR D'ALENE ID 83814																							
4. Names and Addresses of Officers and Directors																								
President: BRADLEY A. FOWLER Secretary: STEVIE PACKARD Directors: — NONE —	<table border="0"> <thead> <tr> <th>Name</th><th>Street or P.O. Address</th><th>City</th><th>State</th><th>Zip</th></tr> </thead> <tbody> <tr> <td></td><td>P.O. Box 2434</td><td>Coeur d'Alene</td><td>ID</td><td>83814</td></tr> <tr> <td></td><td>304 Fernan</td><td></td><td></td><td></td></tr> <tr> <td></td><td>920 Ironwood Dr.</td><td>Coeur d'Alene</td><td>ID</td><td>83814</td></tr> </tbody> </table>				Name	Street or P.O. Address	City	State	Zip		P.O. Box 2434	Coeur d'Alene	ID	83814		304 Fernan					920 Ironwood Dr.	Coeur d'Alene	ID	83814
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	920 Ironwood Dr.	Coeur d'Alene	ID	83814																				
5. Nature of Business Medical Collections	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature: <u>B. Fowler</u> Name (Typed or Printed): _____ Date: <u>11/1/90</u> Title: <u>Pres/Dir</u>																							