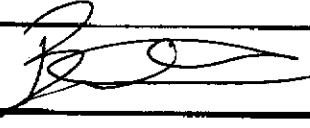


FILED EFFECTIVE

FILED EFFECTIVE Please correct
the name
"BABICHENKO!"

No. C 148616		Reinstatement Annual Report Form ADMIN DISSOLVED 07/08/2009		2. Registered Agent and Office (NOT A P.O. BOX) GENNADY BABICHENKO 503 SW 5TH AVE MERIDIAN ID 83642	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. BABICHENKO DENTAL LAB, INC. 503 SW 5TH AVE MERIDIAN ID 83642		3. New Registered Agent Signature.	
REINSTATEMENT FEE DUE: \$30.00					
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
President	GENNADY BABICHENKO	503 SW 5TH AVE, MERIDIAN, ID, ADA			83642
5. Organized Under the Laws of:		6.			
IDAHO C 148616		Signature: X 		Date: 9/16/10	
		Name (type or print): GENNADY BABICHENKO		Title: President	
Issued 09/16/2010 by KAH					