

INSTRUCTIONS ON REVERSE SIDE

ISSUED: 07-04-1995

No. 65374	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX
Return To	Due No Later Than November 30, 1995	EDWARD A. SHAPIRO, M.D. 324 5TH ST
Secretary of State 700 W Jefferson P.O. Box 83720 Boise, ID 83720-0080	1. Mailing Address -- Please Correct If Not Correct	LEWISTON ID 83501
* FIRST NOTICE *	EDWARD A. SHAPIRO, M.D., P.A. EDWARD A. SHAPIRO, M.D. DRAWER 1510	3. Incorporated Under The Laws of
NO FEE REQUIRED	LEWISTON ID 83501	ID
		NO: 65374

4. Names and Addresses of Officers and Directors

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Postal Code</u>
President:	Edward A. Shapiro, M.D.	324 5th St.	Lewiston	ID	83501
Secretary:	Edward A. Shapiro, M.D.	324 5th St.	Lewiston	ID	83501
Directors:	Edward A. Shapiro, M.D.	324 5th St.	Lewiston	ID	83501

5. Nature of Business

OB/GYN Physician

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	Edward A. Shapiro, M.D.	Date	7/15/85
Name (Typed or Printed)	Edward A. Shapiro, M.D.	Title	President