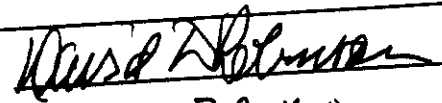
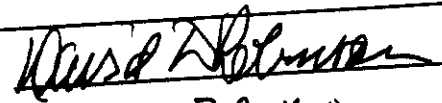
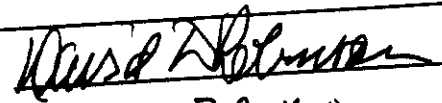


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REINSTATEMENT

No. C 78374 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	Annual Report For ADMIN DISSOLVED 07/07/2003 1. Mailing Address: Correct in this box, if applicable WORKER REHABILITATION ASSOCIATES, I DR. DAVID D. ROBINSON 4265 CORRIENTE PLACE BOULDER, CO 80301	2. Registered Agent and Office NOT A P.O. BOX DAVID D ROBINSON 475 MAIN STREET BOISE, ID 83702 3. New registered agent signature ✓																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1"><thead><tr><th>Office held</th><th>Name</th><th>Street or P.O. Address</th><th>City</th><th>State</th><th>Zip</th></tr></thead><tbody><tr><td>PRESIDENT</td><td>DAVID D. ROBINSON</td><td>4265 CORRIENTE PL.</td><td>BOULDER</td><td>COLORADO</td><td>80301</td></tr><tr><td>SECRETARY</td><td>STEPHA B. ROBINSON</td><td>4265 CORRIENTE PL</td><td>BOULDER</td><td>COLORADO</td><td>80301</td></tr></tbody></table>			Office held	Name	Street or P.O. Address	City	State	Zip	PRESIDENT	DAVID D. ROBINSON	4265 CORRIENTE PL.	BOULDER	COLORADO	80301	SECRETARY	STEPHA B. ROBINSON	4265 CORRIENTE PL	BOULDER	COLORADO	80301
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5. Organized under the laws of: IDAHO C 78371	6. <table border="1"><tr><td>Signature</td><td></td><td>Date</td><td>9/2/03</td></tr><tr><td>Name (Typed or Printed)</td><td>DAVID D. ROBINSON</td><td>Title</td><td>PRESIDENT</td></tr></table>		Signature		Date	9/2/03	Name (Typed or Printed)	DAVID D. ROBINSON	Title	PRESIDENT										
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