No. <b>C 74554</b>		Due no later than Dec 31, 2006		2. Registered Agent and Address (NO PO BOX)				
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  CHRIS M. MAZZOLA, D.D.S., P.A.  CHRIS M MAZZOLA, D.D.S.  PO BOX 989  KETCHUM ID 83340		CHRIS M. MAZZOLA, D.D.S.  181 FIRST AVENUE NORTH  KETCHUM ID 83340  3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE  4. Corporations: Enter Names and Busine					Continual			
	es and busin Name	ess Addresses of	Street or PO Address	reasurer (	City	State	Country	Postal Code
PRESIDENT	RESIDENT CHRIS M. MAZZOLA		BOX 1222 BOX 1222		KETCHUM KETCHUM	ID ID	Country	83340 83340
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
IDA HO C 74554		Signature: Tim Hamilton			Date: 10/10/2006			
		Name (type or print): Tim Hamilton			Title: CPA			
Processed 10/10/2006 * Electronically provided signatures are accepted as original signatures.								