

No. C 56820

Reinstatement Annual Report Form

ADMIN DISSOLVED 02/06/2008

2. Registered Agent and Office (NOT A P.O. BOX)

CHERYL WEAR
314 CALDWELL BLVD
NAMPA ID 83651

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.

HEALTH ENTERPRISES, INC.
CHERYL L WEAR
314 CALDWELL BLVD.
NAMPA ID 83651

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	CHERYL L WEAR	2221 ARIES DR	NAMPA	ID	CANYON	83651
VICE PRESIDENT	KRISTINE L WEAR	644 DRIFTWOOD	NAMPA	ID	CANYON	83651

Organized Under the Laws of

IDAHO
C 56820

Signature:

Date: 2/9/11

Name (type or print)

KRISTINE WEAR

Title:

I.P.