No. C 136601		Due no later than Dec 31, 2007		2. Registered A	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. JUSTIN C. CRESS, DDS, P.A. JUSTIN C CRESS 834 FALLS AVE STE 2030 TWIN FALLS ID 83301		3422 E 3944 KIMBERLY II	JUSTIN C CRESS 3422 E 3944 N KIMBERLY ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
200 30 10		ess Addresses of	President, Secretary, and Directors. Treasu		61.1		D	
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT SECRETARY	JUSTIN C CRESS RREBECCA L CRESS		834 FALLS AVE STE 2030 3422 EAST 3944 NORTH	TWIN FALLS KIMBERLY	ID ID	USA USA	83301 83341	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 136601		Signature: Justin C Cress, DDS				Date: 10/10/2007		
		Name (type o		Title: President				
Processed 10/10/2007 * Electronically provided signatures are accepted as original signatures.								