No. C 89131	**Due no later than Apr 30, 2003** **Annual Report Form**	2. Registered Agent and Office **NO PO BOX**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	1. Mailing Address - Correct in this box if applicable IDA-WA DENTAL LAB, INCORPORATED FREDERICK T SMOLE PO BOX 398 NEW MEADOWS, ID 83654	FREDERICK T SMOLE 3630 HUBBARD LN NEW MEADOWS, ID 83654 3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
PRESIDENT	FREDERICK T. SMOLE	P.O. Box 398	NEW MEADOWS	ID	83654
VICE PRESIDENT	BARBARA F. SMOLE	P.O. Box 398	NEW MEADOWS	ID	83654
SECRETARY	BARBARA F. SMOLE	P.O. Box 398	NEW MEADOWS	ID	83654
TREASURER	FREDERICK T SMOLE	P.O. Box 398	NEW MEADOWS	ID	83654

5. Organized Under the Laws of:	6.
IDAHO C 89131	Signature Barbara F. Smole Date 5-6-03 Name (Typed or Printed) BARBARA F. SMOLE Title Vice President

Issued 05/05/2003

Do Not Tape or Staple