

91227

No.	<b>Idaho Corporation Annual Report Form</b> Due No Later Than November 1, 1992		2. Registered Agent and Office NOT A P.O. BOX <del>PAUL C. COLLINS, M.D.</del> <del>333 N 1ST ST STE 240</del> ROBERT GILBERT, M.D. <del>BOISE 1418 CALDWELL BLVD 83702</del> NAMPA, ID 83651																															
Return To  <b>Secretary of State</b> <b>Room 203, Statehouse</b> <b>Boise, ID 83720</b>  <b>* FIRST NOTICE *</b> <b>NO FEE REQUIRED</b>	1. Mailing Address — Please Correct, If Not Correct <b>OCCUPATIONAL MEDICINE CENTERS,</b> <del>PAUL C. COLLINS, M.D.</del> <b>1418 CALDWELL BLVD</b>  <b>NAMPA</b>		3. Incorporated Under The Laws of <b>ID</b>																															
	<b>ID 83651 0000</b>		<b>NO: 91227</b>																															
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>ROBERT GILBERT, MD.</td> <td>1418 CALDWELL BLVD.</td> <td>NAMPA</td> <td>ID</td> <td>83651</td> </tr> <tr> <td>Secretary:</td> <td>STEVEN OLLIE, MD.</td> <td>1418 CALDWELL BLVD.</td> <td>NAMPA</td> <td>ID</td> <td>83651</td> </tr> <tr> <td>Directors:</td> <td>ROBERT GILBERT, MD</td> <td>- BUSINESS DIRECTOR</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>STEVEN OLLIE, MD</td> <td>- MEDICAL DIRECTOR</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	ROBERT GILBERT, MD.	1418 CALDWELL BLVD.	NAMPA	ID	83651	Secretary:	STEVEN OLLIE, MD.	1418 CALDWELL BLVD.	NAMPA	ID	83651	Directors:	ROBERT GILBERT, MD	- BUSINESS DIRECTOR					STEVEN OLLIE, MD	- MEDICAL DIRECTOR			
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5. Nature of Business  <b>MEDICAL</b>		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <table border="1"> <tr> <td>Signature</td> <td>Date</td> </tr> <tr> <td>Name (Typed or Printed) <b>ROBERT GILBERT</b></td> <td>Title <b>PRESIDENT</b></td> </tr> </table>			Signature	Date	Name (Typed or Printed) <b>ROBERT GILBERT</b>	Title <b>PRESIDENT</b>																										
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