

No. C101955	Annual Report Form Due No Later Than November 30, 1995	2. Registered Agent and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct MEDICAL TECHNOLOGIES, INC. KOBY R. JACKSON P O BOX 717 TWIN FALLS ID 83301	KOBY R. JACKSON 257 DEER ST TWIN FALLS ID 83301 3. Organized Under the Laws of: ID C101986
* FIRST NOTICE *		
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)		
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>
<u>City</u>	<u>State</u>	<u>Zip</u>
President	Koby R. Jackson	P.O. Box 717
Secretary	Robert Thurston	P.O. Box 352
V. Ores,	Jennifer Jackson	P.O. Box 717
		Twin Falls, ID 83303
		Twin Falls, ID 83303
		Twin Falls, ID 83303
5. NATURE OF BUSINESS SOFTWARE FOR BILLINGS		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u><i>Robert D. Thurston</i></u> Date <u>11/04/96</u> Name (Typed or Printed) <u>Robert D. Thurston</u> Title <u>Secretary</u>

ISSUED: 07-06-1995

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