No. C 172544		Due no later than Apr 30, 2014		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. HEALTH PLUS KINESIOLOGY INC ALAN S TRITES 9071 SHOUP		ALAN TRITES 9071 SHOUP BOISE ID 83709				
NO FILING FEE IF RECEIVED BY DUE DATE		BOISE ID 83709 ess Addresses of President, Secretary, and Directors. Treasurer		3. New Registered Agent Signature:*				
Office Held	nes and busin Name	ess addresses of	Street or PO Address	reasurer	(opuonar). City	State	Country	Postal Code
DIRECTOR PRESIDENT	ALAN S TRITES DAVID W RAMSEY		2801 W LOST RAPID DR 13663 S LOCUST		MERIDIAN OLATHE	ID KS	USA USA	83646 66061
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Alan Trites		Da	Date: 03/02/2014			
C 172544		Name (type or print): Alan Trites		Tit	Fitle: Owner- Biz Closed Aug 2012			
Processed 03/02/2014 * Electronically provided signatures are accepted as original signatures.								