

INSTRUCTIONS ON REVERSE SIDE

No. 106666

Idaho Corporation Annual Report Form

ISSUED: 03-30-1993
2. Registered Agent and Office NOT A P.O. BOX

Return To

Due No Later Than November 30

ET CORPORATION SYSTEM
300 N 6TH STSecretary of State
700 W Jefferson
P.O. Box 83720

1. Mailing Address - Please Correct if Not Correct

BOISE ID 83701

Boise, ID 83720-0080

** FINAL NOTICE **

NO FEE REQUIRED

MOLLEN CLINICS, P.A.
ARTHUR J MOLLEN
4602 N 16TH ST #200

3. Incorporated Under The Laws of

PHOENIX AZ 85016

ID

No: 106666

4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Postal Code
President:	Arthur J Mollen DO.	10025 N. 78th Place	Scottsdale,	AZ	85258
Secretary:					
Directors:					

5. Nature of Business

Immunization
Clinics

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

Name (Typed or Printed)



Arthur J. Mollen, DO.

Date

Title

10/20/95

President