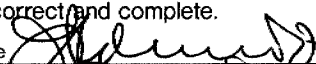
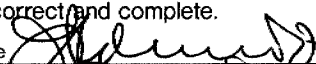
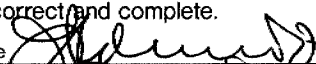


ISSUED: 07-05-1994

No. 49552	Idaho Corporation Annual Report Form		2. Registered Agent and Office																					
Return To Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	Due No Later Than November 1, 1994		JAMES M. QUINN 2098 WHITE PINE LANE BOISE ID 83704																					
	1. Mailing Address — JAMES M. QUINN, D.O., P.A. JAMES M QUINN 2098 WHITE PINE LANE BOISE ID 83306 83706		3. Incorporated Under The Laws of ID NO: 49552																					
4. Names and Addresses of Officers and Directors <table border="1"> <thead> <tr> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President: JAMES M. QUINN</td> <td>2098 White PINE LN,</td> <td>Boise</td> <td>ID</td> <td>83706</td> </tr> <tr> <td>Secretary:</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Directors:</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					Name	Street or P.O. Address	City	State	Zip	President: JAMES M. QUINN	2098 White PINE LN,	Boise	ID	83706	Secretary:					Directors:				
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Secretary:																								
Directors:																								
5. Nature of Business Medicine	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="0"> <tr> <td>Signature </td> <td>Date 7-22-94</td> </tr> <tr> <td>Name (Typed or Printed) James M. Quinn</td> <td>Title President</td> </tr> </table>				Signature 	Date 7-22-94	Name (Typed or Printed) James M. Quinn	Title President																
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