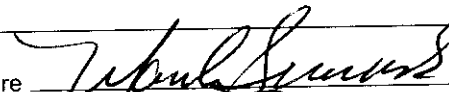
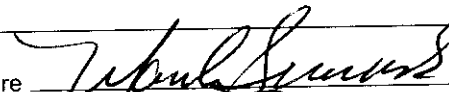
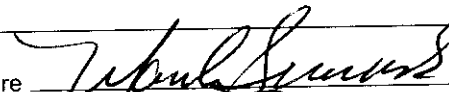


<b>No. C 139631</b>	<b>Due no later than Jun 30, 2003</b> <b>Annual Report Form</b>	2. Registered Agent and Office <b>NO PO BOX</b>																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		1. Mailing Address <small>Correct in this box, if applicable</small> <b>SEWEST MEDICAL SERVICES CORPORATION</b>  2824 POLELINE RD #A  POCATELLO, ID 83201	MARK SEMONS 2485 N CIMMERON CIRCLE  POCATELLO, ID 83204  3. <u>New</u> Registered Agent Signature																	
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="0" style="width: 100%;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President,</td> <td>JASON WEST</td> <td>755 Hospital Way</td> <td>POCATELLO</td> <td>ID</td> <td>83201</td> </tr> <tr> <td>CEO,</td> <td>MARK SEMONS</td> <td>2824 Poleline Rd. #A</td> <td>POCATELLO, ID</td> <td></td> <td>83204</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President,	JASON WEST	755 Hospital Way	POCATELLO	ID	83201	CEO,	MARK SEMONS	2824 Poleline Rd. #A	POCATELLO, ID		83204
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5. Organized Under the Laws of:  IDAHO C 139631	6. <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">Signature </td> <td style="width: 50%;">Date 4-7-03</td> </tr> <tr> <td>Name <small>(Typed or Printed)</small> MARK SEMONS</td> <td>Title CEO</td> </tr> </table>		Signature 	Date 4-7-03	Name <small>(Typed or Printed)</small> MARK SEMONS	Title CEO														
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