741.0544	Due no later than August 31, 2008	2. Registered Agent and Office NO PO BOX
No. W 9541	Annual Report Form	ALICE SAGER
letum to:	1. Mailing Address - Correct in this box, if applicable	2125 OVERLAND RD BOISE, ID 83705
SECRETARY OF STATE	EXCEL DENTAL TECHNIQUES LLC	BOISE, ID 00700
450 NORTH FOURTH STREET PO BOX 83720	ALICE SAGER	
BOISE, ID 83720-0080	2125 OVERLAND RD STE A BOISE, ID 83705	3. New Registered Agent Signature
	, DOIGE, 12	
NO FILING FEE IF		
RECEIVED BY DUE DATE	nies: Enter Names and Addresses of Managers.	
<ol> <li>Limited Liability Compar</li> </ol>	lies: Enter Names and Adams	ity <u>State</u> <u>Zip</u>
Office held Name	Street or P.O. Address	Rose #0 85705
	SACTO 2175 OVERLAND RO	130156
MANAGER IMEMBER 72	ice mak and a preclare it	O BOISE IN 85/03
14	Street or P.O. Address  ICE SAGER 2125 OVERLAND RD  ICE SAGER 2125 OVERLAND K	·
MANAGEL MEMPER		
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		•
		1.15.08
5. Organized Under the Laws of:	6. Alice A. S.	ages_ Date_6.35.08
5. Organized Under the Laws of:	6. Signature Alice A. So	ager_Date_6.75.08