

No. **C 109422****Due no later than February 28, 2006****Annual Report Form**2. Registered Agent and Office **NO PO BOX**

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080**1. Mailing Address - Correct in this box, if applicable**PAMELA A. POWELL, D.M.D., P.A.
120 N 23RD
BOISE, ID 83702PAMELA A POWELL DMD
120 N 23RD
BOISE, ID 83702**NO FILING FEE IF
RECEIVED BY DUE DATE**3. New Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

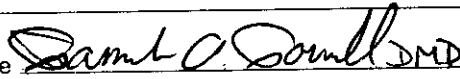
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Pres.	Pamela A. Powell	5232 N. 36th St. 120 N. 23rd St.	Boise	ID	83702
Sec.	Robin Dodson	"	"	"	"

5. Organized Under the Laws of:

IDAHO
C 109422

6.

Signature



Date

1-28-06

Name

(Typed or
Printed)

Pamela A. Powell DMD

Title

Pres.
Owner/ident

Issued 12/01/2005

Do Not Tape or Staple

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