No. C 144130		Due no later than Jun 30, 2003 Annual Report Form 1. Mailing Address - Correct in this box, if applicable ADVANCED FAMILY DENTISTRY, P.C. 1603-D 12TH AVE RD		2. Registered Agent and Office NO PO BOX MARCO V GALVEZ 1603-D 12TH AVE RD NAMPA, ID 83686	
Return to: SECRETARY OF STAT 700 WEST JEFFERSC PO BOX 83720	N ADVAN				
BOISE, ID 83720-0080	1603-D				
NO FILING FEE IF		, ID 83686	3. <u>1</u>	New Registered Ag	ent Signature
4. Corporations: Fi		Business Addresses of President,	Secretary a	nd Directors.	
Office held Name		Street or P.O. Address	City Nampa		83686
1		- 4	Nampo	r ID	83686
5. Organized Under the L		6. Signature Estatu Alex		Date	8 03
IDAH		Name Printed or Renata Galve	S ez	Title	