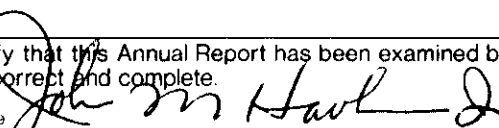
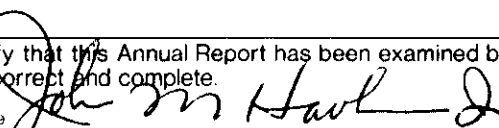
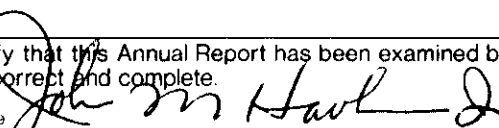


No.	Idaho Corporation Annual Report Form Due No Later Than November 1, 1992		2. Registered Agent and Office NOT A P.O. BOX JOHN M. HAVLINA, JR. 999 N. CURTIS RD., SUITE																									
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address — Please Correct, If Not Correct		BOISE ID 83706																									
	JOHN M. HAVLINA, JR., M.D., PRO 999 N. CURTIS RD, SUITE 505 BOISE ID 83706 0000		3. Incorporated Under The Laws of NO: 63764																									
4. Names and Addresses of Officers and Directors																												
<table border="1"> <thead> <tr> <th></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>John M. Havlina, Jr.</td> <td>999 N. Curtis Rd. #505</td> <td>Boise,</td> <td>Idaho</td> <td>83706</td> </tr> <tr> <td>Secretary:</td> <td>Sharon Corelle</td> <td>999 N. Curtis Rd. #505</td> <td>Boise,</td> <td>Idaho</td> <td>83706</td> </tr> <tr> <td>Directors:</td> <td>John M. Havlina, Jr.</td> <td>999 N. Curtis Rd. #505</td> <td>Boise,</td> <td>Idaho</td> <td>83706</td> </tr> </tbody> </table> Secretary Mary B. Haskins						<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President:	John M. Havlina, Jr.	999 N. Curtis Rd. #505	Boise,	Idaho	83706	Secretary:	Sharon Corelle	999 N. Curtis Rd. #505	Boise,	Idaho	83706	Directors:	John M. Havlina, Jr.	999 N. Curtis Rd. #505	Boise,	Idaho	83706
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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="1"> <tr> <td>Signature</td> <td></td> <td>Date</td> <td>8-4-92</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>John M. Havlina, Jr.</td> <td>Title</td> <td>President</td> </tr> </table>			Signature		Date	8-4-92	Name (Typed or Printed)	John M. Havlina, Jr.	Title	President																
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