No. <b>C 145868</b>		Due no later than Oct 31, 2010		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		to the second of	CORPORATION SERVICE COMPANY 1401 SHORELINE DRIVE STE 2 BOISE ID 83702			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  PEAK MEDICAL COLORADO NO. 2 INC.  LEGAL DEPT  101 SUN AVE. NE						
				BOISE ID 63				
		ALBUQUERQUE NI	3. <u>New</u> Registere	3. <u>New</u> Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Nan	nes and Busin	ess Addresses of Pres	ident, Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT			101 SUN AVE. NE	ALBUQUERQUE	NM	USA	87109	
SECRETARY	MICHAEL T BERG		101 SUN AVE. NE	ALBUQUERQUE	NM	USA	87109	
DIRECTOR	WILLIAM A	MATHIES	101 SUN AVE. NE	ALBUQUERQUE	NM	USA	87109	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
DE		Signature: Michael T. Berg			Date: 08/10/2010			
C 145868		Name (type or print): Michael T. Berg			Title: Secretary			
Processed 08/10/2010 * Electronically provided signatures are accepted as original signatures.								