

No. C 113282

Due no later than January 31, 2005  
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

MAGIC VALLEY DENTURE CENTER, INC.  
JOHN SANDER  
253 FIFTH AVE N  
TWIN FALLS, ID 83301

JOHN SANDER  
253 FIFTH AVE N  
TWIN FALLS, ID 83301

**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>
President	John Sander	253 5th Ave N.	Twin Falls,	ID-	83301

5. Organized Under the Laws of:

IDAHO  
C 113282

6.

Signature

Date 12-3-04

Name (Typed or  
Printed)

John Sander

Title

President

Issued 11/01/2004

Do Not Tape or Staple

2.00501E+11