No. C 157993		Due no later than Dec 31, 2012		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		PETER J LEICHTNAM			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed.		1200 W IRONWOOD DR STE 309 COEUR D'ALENE ID 83814			
		AMERICAN MOBILE DRUG TESTING-A DRUG FREE ALLIANCE, INC. PETER J LEICHTNAM		COEUR D'ALEINE 1D 03814			
		1200 W IRONWOOD DR STE 309		3. <u>New</u> Registered Agent Signature:*			
		COEUR D'ALENE ID 83814 USA					
4. Corporations: Enter	Names and Busin	ess Addresses of Pres	ident, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
PRESIDENT SECRETARY	PETER J. LEICHTNAM KATHY R FARRAR		15964 N. SONGBIRD LANE 1200 W. IRONWOOD DR. STE 309	RATHDRUM COEUR D' ALENE	ID ID	USA USA	83858 83814
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 157993		Signature: Peter J	Date: 12/14/2012				
		Name (type or pri	Title: President				
Processed 12/14/2012		* Electronically provid	led signatures are accepted as original sign	natures.			