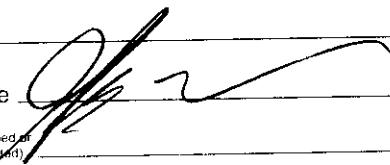


<b>No. C 64248</b>	<b>Due no later than Jul 31, 2003</b> <b>Annual Report Form</b>	<b>2. Registered Agent and Office NO PO BOX</b>
<b>Return to:</b> SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	<b>1. Mailing Address - Correct in this box if applicable</b> HIGH DESERT ORTHODONTICS, P.A. 318 FALLS AVE TWIN FALLS, ID 83301	SHANE SCWANEVELDT 318 FALLS AVE TWIN FALLS, ID 83301
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>3. New Registered Agent Signature</b>

**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	Jeffrey Geist.	318 Falls Ave.	Twin Falls	ID	83301
Secretary	Janice Geist	" "	" "	" "	" "
Vice President	Shane Schwaneveldt	" "	" "	" "	" "
Treasurer	Jamie Schwaneveldt				

<b>5. Organized Under the Laws of:</b> <div style="text-align: center; margin-top: 10px;">             IDAHO              C 64248           </div>	<b>6.</b> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">             Signature               Name (Typed or Printed) _____           </div> <div style="width: 35%;">             Date <u>7-16-03</u>              Title _____           </div> </div>
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