

No. 059257	Idaho Corporation Annual Report Form		2. Registered Agent and Office																									
Return To	Due No Later Than November 1, 1988																											
Secretary of State Room 203, Statehouse Boise, ID 83720 SEC. 10	1. Mailing Address — Please Correct 059257		GREGORY A. MAAG 333 WEST CENTER POCA TELLO, IDAHO 83204																									
	MAAG PRESCRIPTION AND MEDICAL SUPPLY GREGORY A. MAAG 333 WEST CENTER POCA TELLO, IDAHO 83204																											
88 SEP 12 AM 10 03			3. Incorporated Under The Laws of STATE OF IDAHO ENTERED SEP 12 1988																									
4. Names and Addresses of Officers and Directors																												
<table border="1"> <thead> <tr> <th></th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>Greg MAAG</td> <td>1675 SHAWNEE</td> <td>POCA TELLO</td> <td>IDAHO</td> <td>83204</td> </tr> <tr> <td>Secretary:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Directors:</td> <td>KATHY MAAG</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>						Name	Street or P.O. Address	City	State	Zip	President:	Greg MAAG	1675 SHAWNEE	POCA TELLO	IDAHO	83204	Secretary:						Directors:	KATHY MAAG	"	"	"	"
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Secretary:																												
Directors:	KATHY MAAG	"	"	"	"																							
5. Nature of Business PHARMACY & MEDICAL SUPPLY		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>Date</td> </tr> <tr> <td> Name (Typed or Printed) Greg MAAG </td> <td> 9-9-88 Pres. </td> </tr> </table>			Signature	Date	Name (Typed or Printed) Greg MAAG	9-9-88 Pres.																				
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