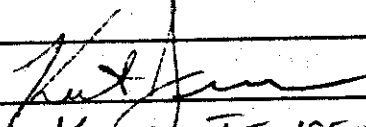


No. <b>C 137105</b>	<b>Due no later than January 31, 2008</b>		<b>2. Registered Agent and Office NO PO BOX</b>		
<b>Return to:</b> <b>SECRETARY OF STATE</b> <b>450 NORTH FOURTH STREET</b> <b>PO BOX 83720</b> <b>BOISE, ID 83720-0080</b>  <b>NO FILING FEE IF</b> <b>RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b> <b>1. Mailing Address - Correct in this box, if applicable</b> <b>KJ'S PHARMACY &amp; MEDICAL SUPPLY, INC</b> <b>202 GULCH LANE</b> <b>TWIN FALLS, ID 83301</b>		<b>KENT JENSEN</b> <b>202 GULCH LANE</b> <b>TWIN FALLS, ID 83301</b>  <b>3. New Registered Agent Signature</b>	
<b>4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.</b>					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
<i>Pres</i>	<i>KENT JENSEN</i>	<i>202 Gulch Ln</i>	<i>Twin Falls</i>	<i>IA</i>	<i>83301</i>
<b>5. Organized Under the Laws of:</b> <b>IDAHO</b> <b>C 137105</b>		<b>6.</b> <b>Signature</b>  <b>Date</b> <i>11-26-07</i> <b>Name</b> <small>(Typed or Printed)</small> <i>KENT JENSEN</i> <b>Title</b> <i>Pres</i>			

Issued 11/01/2007

**Do Not Tape or Staple**

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