No. C114315			Annual Report Form 1 4 2 3 Due No Later Than November 30,					2. Registered Agent and Office NOT A P.O. BOX			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			1. Mailing Address - Please Correct, If Not Correct					324 FILLMORE ST			
			JANINE C. NEIWIRTH, R.D., P.					TWIN FALLS ID 8330			0 83301
	NO FEE REQUIRED		324 FILLMORE ST					3. Organized Under the Laws of:			
*	FIRST NOT!	TWIN FALLS ID 53301 .					15 . C		C 1	114916	
4.	Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one)										
	Office held	Name		Stre	et or P.C	D. Address		<u>City</u>		<u>State</u>	<u>Zip</u>
	President Secretary Director	Thomas	C. Nei C. Nei	wirth wirth	324 324	Fillmore Fillmore Fillmore	St. St.	Twin Twin	Falls, Falls,	ID	83301 83301 83301
5.	NATURE OF	BUSINES	S	6. I certify knowled Signatu	dge true	Annual Report h	plete	uw	Date _7/	2 5/9	6
	DIETARY	CONSULT	ATION	Name (Typed or Trinted)	anine C. 1	Neiwi	rth	Title	side	nt
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