No. C 48631	Due no later than Dec 31, 20 Annual Report Form	2. Registered Agent and Office NO PO	вох
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if app TOM'S MEDICAL ARTS PHARMACY, INC THOMAS ALLEN 1448 EAST CENTER	POCATELLO, ID 83201	
NO FILING FEE IF RECEIVED BY DUE DATE	POCATELLO, ID 83201	3. <u>New</u> Registered Agent Signature	
 Corporations: Enter Nar 	mes and Business Addresses of Presiden	nt, Secretary and Directors.	
Office held Name	Street or P.O. Address	<u>City</u> <u>State</u> <u>Zip</u>	
Secretary Nedra P. Director James T.	llen, 147 West Chubbuck Rd. Allen 147 West Chubbuck Rd. Allen 12600 So. 4000 West Allen 2062 St. Clair	Chubbuck ID 83202 Chubbuck ID 83202 Riverton Ut 84065 Idaho Falls ID 83404	
IDAHO C 48631	Signature <u>Pedsa</u> Name (Typed or Nedra Allen	Date 2-7-2000 Title: Secretary	
Issued 10/02/2000	Do Not Tape or Staple	_	39