

No. 57712	Idaho Corporation Annual Report Form Due No Later Than November 1, 1994	2. Registered Agent and Office NOT A P.O. BOX C T CORPORATION SYSTEM 303 NORTH 6TH STREET BOISE ID 83701
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 ** FINAL NOTICE ** NO FEE REQUIRED	1. Mailing Address — <i>Please Correct If Not Correct</i> PAID PRESCRIPTIONS, INC. TAX DEPARTMENT 100 SUMMIT AVE MONTVALE NJ 07645	3. Incorporated Under The Laws of NV NO: 57712

4. Names and Addresses of Officers and Directors

MUST BE PRINTED OR TYPED

	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	Paul C. Suthern	100 Summit Avenue	Montvale	NJ	07645
Secretary:	James V. Manning	same			
Directors:	James V. Manning	same			
Vice President	Frank J. Failla, Jr.	same			

5. Nature of Business

Prescription Management
Service

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name (Type or Print)


 Frank J. Failla, Jr.

Date

11/1/94

Title

Vice President