

No. C 85303	Annual Report Form 1996 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 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct PHARMACY SHOP INC. EDWARD L. SNELL 1642 MONTE VISTA POCATELLO ID 83201		EDWARD L. SNELL 1110 N 8TH AVE POCATELLO ID 83201
	3. Organized Under the Laws of: ID C 85303		

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	Street or P.O. Address	City	State	Zip
Pres	Edward L Snell	1110 No 8th	Pocatello	Id	83201
Sec	Rebecca S Snell	1110 No 8th	Pocatello	Id	83201

5. NATURE OF BUSINESS PHARMACY-RETAIL	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 <u>Edward L Snell</u> Name (Typed or Printed) <u>Edward L Snell</u>	Date <u>8/6/96</u> Title <u>Pres</u>

ISSUED: 07-06-1996