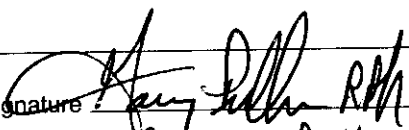
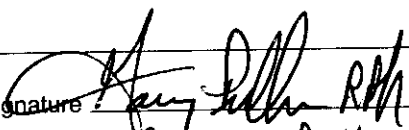
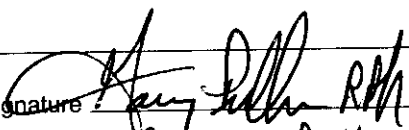


No. C 30595	Due no later than Feb 28, 2002 Annual Report Form	2. Registered Agent and Office NO PO BOX GARY K. PULLEN R.PH 245 N. PLACER IDAHO FALLS, ID 83401
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable PRESCRIPTION CENTER, INC. P.O. BOX 2102 IDAHO FALLS, ID 83401	3. <u>New</u> Registered Agent Signature

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
	President Gary K. Pullen	188 Springwood Lane	Idaho Falls	ID	83404
	V. President Stacy Pullen	188 Springwood Lane	Idaho Falls	ID	83404

5. Organized Under the Laws of: IDAHO C 30595	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature:  </td> <td style="width: 40%;"> Date: <u>3-12-02</u> </td> </tr> <tr> <td> Name: <small>(Typed or Printed)</small> <u>Gary K. Pullen</u> </td> <td> Title: <u>President</u> </td> </tr> </table>	Signature: 	Date: <u>3-12-02</u>	Name: <small>(Typed or Printed)</small> <u>Gary K. Pullen</u>	Title: <u>President</u>
Signature: 	Date: <u>3-12-02</u>				
Name: <small>(Typed or Printed)</small> <u>Gary K. Pullen</u>	Title: <u>President</u>				