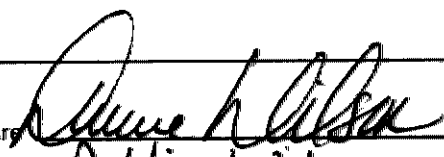
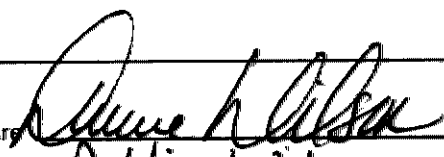
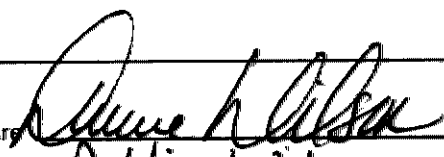


No. C104035	Annual Report Form Due No Later Than November 30, 1999		2. Registered Agent and Office NOT A P.O. BOX DAVID A RICE 657 BLUE LAKES BLVD NORTH TWIN FALLS ID 83301																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct HEALTH FOOD PLACE, INC. (THE DAVID A RICE 657 BLUE LAKES BLVD NORTH TWIN FALLS ID 83301		3. Organized Under the Laws of: ID C104035																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)																					
<table style="width: 100%; border: none;"> <thead> <tr> <th style="text-align: left; width: 10%;">Office held</th> <th style="text-align: left; width: 25%;">Name</th> <th style="text-align: left; width: 35%;">Street or P.O. Address</th> <th style="text-align: left; width: 15%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 5%;">Zip</th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;">President</td> <td>David A Rice</td> <td>657 Blue lakes N.</td> <td>Twin Falls</td> <td>id.</td> <td>83301</td> </tr> <tr> <td style="vertical-align: top;">Secretary</td> <td>Debbie A Wilson</td> <td>657 Blue lakes N.</td> <td>Twin Falls</td> <td>id.</td> <td>83301</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	President	David A Rice	657 Blue lakes N.	Twin Falls	id.	83301	Secretary	Debbie A Wilson	657 Blue lakes N.	Twin Falls	id.	83301
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Secretary	Debbie A Wilson	657 Blue lakes N.	Twin Falls	id.	83301																
5. Signature of New Registered Agent		6. <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;"> Signature  </td> <td style="width: 50%;"> Date <u>July 12 1999</u> </td> </tr> <tr> <td> Name (Typed or Printed) <u>Debbie Wilson</u> </td> <td> Title <u>Secretary</u> </td> </tr> </table>		Signature 	Date <u>July 12 1999</u>	Name (Typed or Printed) <u>Debbie Wilson</u>	Title <u>Secretary</u>														
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ISSUED: 07-03-1999

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