

No. C 29693	Annual Report Form Due No Later Than November 30, 1996		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 DRUGS, INC. DARRELL L. COX 1221 BROADWAY AVENUE		DARRELL L. COX 1221 BROADWAY BOISE ID 83706	
			3. Organized Under the Laws of:	
* FIRST NOTICE * BOISE ID 83706 ID C 29693				
4. Corporations: Enter Names and 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)				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>
PRESIDENT	DARRELL COX	3520 WINDSOR	Boise	ID
Sec.	SHAR COX	3520 WINDSOR	"	ID
				83705
5. NATURE OF BUSINESS RETAIL PHARMACY		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><i>[Signature]</i></u> Date <u>8-8-96</u> Name (Typed or Printed) <u>DARRELL COX</u> Title <u>Pres.</u>		

ISSUED: 07-06-1996

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