

No. C 111888	Due no later than August 31, 2005 Annual Report Form	2. Registered Agent and Office NO PO BOX VICTOR F ALLEN 17931 BRIARCREEK MURPHY, ID 83650																		
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 VIC'S FAMILY PHARMACY, INC. 1603 12TH AVE RD NAMPA, ID 83686	3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table style="width: 100%; margin-top: 10px;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Victor F. Allen</td> <td>17931 Briarcreek</td> <td>Murphy</td> <td>ID</td> <td>83650</td> </tr> <tr> <td>Secretary/ Treasurer</td> <td>Martina Allen</td> <td>17931 Briarcreek</td> <td>Murphy</td> <td>ID</td> <td>83650</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President	Victor F. Allen	17931 Briarcreek	Murphy	ID	83650	Secretary/ Treasurer	Martina Allen	17931 Briarcreek	Murphy	ID	83650
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Secretary/ Treasurer	Martina Allen	17931 Briarcreek	Murphy	ID	83650															
5. Organized Under the Laws of: IDAHO C 111888	6. <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 50%;"> Signature <u><i>Victor F Allen</i></u> </td> <td style="width: 50%;"> Date <u>June 7, '05</u> </td> </tr> <tr> <td> Name (Type or Print) <u>Victor F Allen</u> </td> <td> Title <u>President</u> </td> </tr> </table>		Signature <u><i>Victor F Allen</i></u>	Date <u>June 7, '05</u>	Name (Type or Print) <u>Victor F Allen</u>	Title <u>President</u>														
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