No. C 116945		Due no later than Oct 31, 2009		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. EASTGATE DRUG, INC. COREY SMITH 2605 LONE PINE DR IDAHO FALLS ID 83404		2270 5 1771	COREY SMITH 3270 E. 17TH ST. IDAHO FALLS ID 83406 3. New Registered Agent Signature:*			
				TIDAHO FALLS				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Na	mes and Busin	ess Addresses of P	resident, Secretary, and Directors. Trea	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT COREY B SN		MITH	2605 LONE PINE DRIVE	IDAHO FALLS	ID	USA	83404	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Core		Date: 09/03/2009				
C 116945		Name (type or		Title: President				
Processed 09/03/2009 * Electronically provided signatures are accepted as original signatures.								