

No. 061810	Idaho Corporation Annual Report Form	2. Registered Agent and Office																														
Return To Secretary of State Room 203, Statehouse Boise, ID 83720 REC'D OF STATE 87 OCT 13 AM 9 11	Due No Later Than November 1, 1987	EDITH MILLER KLEIN 1400 IDAHO 1ST PLAZA, 80 BOISE, IDAHO 83701																														
	1. Mailing Address — Please Correct 061810 EAST-WEST, INC. NORMA SKOPIN/JUDY KNEE P.O. BOX 4272 NEW WINDSOR, NEW YORK 12550		3. Incorporated Under The Laws of STATE OF IDAHO																													
4. Names and Addresses of Officers and Directors																																
<table border="0"> <thead> <tr> <th></th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President:</td> <td>GARY S KNEE</td> <td>52 Gregory Dr.</td> <td>Goshaw</td> <td>N.Y.</td> <td>10924</td> </tr> <tr> <td>Secretary:</td> <td>JUDITH KNEE</td> <td>" "</td> <td>" "</td> <td>" "</td> <td>" "</td> </tr> <tr> <td>Directors:</td> <td>NORMA SKOPIN</td> <td>30 Ona lane</td> <td>New Windsor</td> <td>NY</td> <td>12550</td> </tr> <tr> <td></td> <td>Joseph Skopin</td> <td>" "</td> <td>" "</td> <td>" "</td> <td>" "</td> </tr> </tbody> </table>		Name	Street or P.O. Address	City	State	Zip	President:	GARY S KNEE	52 Gregory Dr.	Goshaw	N.Y.	10924	Secretary:	JUDITH KNEE	" "	" "	" "	" "	Directors:	NORMA SKOPIN	30 Ona lane	New Windsor	NY	12550		Joseph Skopin	" "	" "	" "	" "		
	Name	Street or P.O. Address	City	State	Zip																											
President:	GARY S KNEE	52 Gregory Dr.	Goshaw	N.Y.	10924																											
Secretary:	JUDITH KNEE	" "	" "	" "	" "																											
Directors:	NORMA SKOPIN	30 Ona lane	New Windsor	NY	12550																											
	Joseph Skopin	" "	" "	" "	" "																											
AS OF MARCH 25, 1987 EAST-WEST INC HAS NO LONGER BEEN IN BUSINESS and is currently BEING desolved. PAPERS ARE BEING DRAWN for dissolution.																																
5. Nature of Business DIET CENTER FRANCHISE	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>Judith Kne</u> Name (Typed or Printed): <u>JUDITH KNEE</u> Date: <u>OCT 14 1986</u> Title: <u>SECTY</u>																															

10000400 0437