

INSTRUCTIONS ON REVERSE SIDE

No. 79936	Idaho Corporation Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX
Return To	Due No Later Than November 30, 1995	TOM OLSEN 228 SOUTH COLE ROAD
Secretary of State 700 W Jefferson P.O. Box 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address - Please Correct if Not Correct	
	NUTRI-PLUS, INC. TOM OLSEN 228 S COLE RD BOISE ID 83709	BOISE ID 83709 3. Incorporated Under The Laws of ID NO: 79936

4. Names and Addresses of Officers and Directors

	Name	Street or P.O. Address	City	State	Postal Code
President:	TOM OLSEN	1035 W. TEQUILA	BOISE	ID	83709
Secretary:					
Directors:					

5. Nature of Business

LIVESTOCK
SUPPLIER

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

Name

(Typed or
Printed)

TOM OLSEN

Date

7/19/95

Title

PRESIDENT