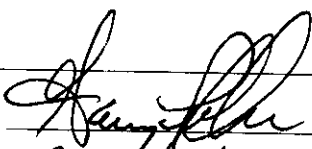


No. C 30595	Due no later than Feb 28, 2001																				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form		2. Registered Agent and Office NO PO BOX																		
	1. Mailing Address - Correct in this box, if applicable PRESCRIPTION CENTER, INC. P.O. BOX 2102 IDAHO FALLS, ID 83401		GARY K. PULLEN R.PH 245 N. PLACER IDAHO FALLS, ID 83401																		
			3. <u>New</u> Registered Agent Signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td></td> <td>President Gary K. Pullen</td> <td>188 Springwood Cr.</td> <td>Idaho Falls,</td> <td>ID.</td> <td>83404</td> </tr> <tr> <td></td> <td>V. President Stacy Pullen</td> <td>188 Springwood Cr.</td> <td>Idaho Falls,</td> <td>ID.</td> <td>83404</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 Gary K. Pullen	188 Springwood Cr.	Idaho Falls,	ID.	83404		V. President Stacy Pullen	188 Springwood Cr.	Idaho Falls,	ID.	83404
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5. Organized Under the Laws of: IDAHO C 30595	6.  Signature _____ Date <u>12-19-00</u> Name (Typed or Printed) <u>Gary Pullen</u> Title: <u>President</u> XXXX																				