

No. C 125367	Due no later than Aug 31, 2002	2. Registered Agent and Office NO PO BOX												
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 1. Mailing Address - Correct in this box, if applicable NORTHWEST WEIGHT LOSS INSTITUTE, IN 1700 NORTHWEST BLVD COEUR D'ALENE, ID 83814	KATHLEEN CHMURA 2221 IRONWOOD CENTER DR 1700 Northwest Blvd. COEUR D'ALENE, ID 83815 3. <u>New</u> Registered Agent Signature												
<p>4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.</p> <table border="1"> <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>Pres.</td> <td>Kathleen CHMURA</td> <td>1700 Northwest Blvd.</td> <td>C.D.A. Id.</td> <td>Id.</td> <td>83814</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>	Pres.	Kathleen CHMURA	1700 Northwest Blvd.	C.D.A. Id.	Id.	83814
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>									
Pres.	Kathleen CHMURA	1700 Northwest Blvd.	C.D.A. Id.	Id.	83814									
5. Organized Under the Laws of: IDAHO C 125367	6. Signature <u>Kathleen Chmura</u> Date <u>7/9/02</u> Name <small>(Typed or Printed)</small> <u>KATHLEEN CHMURA</u> Title <u>President</u>													