NATURE OF BUSINESS	6. I certify that this Annual Report has been knowledge true, correct and complete.  Signature Willows AINTENANCE Name Printed or Miles M. LAR	Date	7/16/96	st of my
NATURE OF BUSINESS	knowledge true, correct and complete. Signature	Date	7/16/96	st of my
	knowledge true, correct and complete.	,	//	st of my
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CAROL AAMBI	N 5809 N 5 1 E I		•	83 Yes
		dalu Falls	<u> </u>	83401
Office held Name	Street or P.O. Address	City	State	<u>Zîp</u>
Corporations: Enter Names and Addre Limited Liability Companies: Enter Nam	esses of President, Secretary and Directors	ers (check one)		
* FIRST NOTICE * ID	AHO EALLS ID 83401	10	C106	511
	<del>09</del> N 5TH E	3. Organized Un	der the Laws of:	
BO BOV 02720 / I	28	IDAHO F	ALLS ID	83401
SECRETARY OF STATE 700 WEST JEFFERSON TE	TON AUTO, INC.	5839 N	STH E	
		MILO M	LARSEN	
O. C106511  Return to: 1. Siai	Due No Later Than November 30,	_		