

No. <b>C 97405</b>	<b>Annual Report Form</b> <b>1996</b> Due No Later Than November 30,		2. Registered Agent and Office <b>NOT A P.O. BOX</b>																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>  <b>* FIRST NOTICE *</b>	1. Mailing Address - Please Correct, If Not Correct  <b>DON'S SERVICE STATION EQUIPM</b> <b>KEVIN TEW</b> <b>2601 ST. LEON RD</b>  <b>IDAHO FALLS ID 83401</b>		<b>KEVIN TEW</b> <b>800 PESCADERO PLACE</b>  <b>IDAHO FALLS ID 83404</b>  3. Organized Under the Laws of:  <b>ID C 97405</b>																			
4. Corporations: Enter Names and Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input checked="" type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)  <table border="1"> <thead> <tr> <th>Office held</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>PRES.</td> <td>KEVIN TEW</td> <td>800 PESCADERO</td> <td>IF</td> <td>ID</td> <td>83404</td> </tr> <tr> <td>Sec./TRES.</td> <td>CARRIE TEW</td> <td>" "</td> <td>" "</td> <td>" "</td> <td>" "</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	PRES.	KEVIN TEW	800 PESCADERO	IF	ID	83404	Sec./TRES.	CARRIE TEW	" "	" "	" "	" "
Office held	Name	Street or P.O. Address	City	State	Zip																	
PRES.	KEVIN TEW	800 PESCADERO	IF	ID	83404																	
Sec./TRES.	CARRIE TEW	" "	" "	" "	" "																	
5. <b>NATURE OF BUSINESS</b>  <b>SERVICE STATION EQUIPMENT</b>	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>Carrie Tew</u> Date <u>7-15-96</u> Name (Typed or Printed) <u>Carrie Tew</u> Title <u>Owner</u>																					

ISSUED: 07-06-1996

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