

No.

W

605

Annual Report Form

1997

2. Registered Agent and Office NOT A P.O. BOX

Due No Later Than November 30,

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FEE REQUIRED

* FIRST NOTICE *

1. Mailing Address - Please Correct, If Not Correct

LUBE CENTER, L.L.C. (THE)
GARY D OPPER
9375 W FAIRVIEW AVE

BOISE

ID 83704

GARY D OPPER
8901 KIOWA DR

BOISE

ID 83709

3. Organized Under the Laws of:

ID

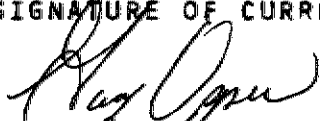
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4. Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**
Limited Liability Companies: Enter Names and Addresses of ☒ Managers or ☒ Members (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
MANAGER	GARY OPPER	8901 KIOWA DR	Boise	ID	83709
MEMBER	TERI OPPER	" " "	"	"	"
MEMBER	BRADLEY OPPER	" " "	"	"	"
MEMBER	NICOLE OPPER	" " "	"	"	"

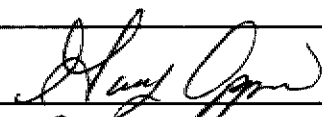
5. SIGNATURE OF CURRENT RA



ISSUED: 07-04-1997

6.

Signature



Date

7-11-97

Name (Typed or Printed)

GARY OPPER

Title

MANAGER

2450

DO NOT TAPE OR STAPLE