No. <b>W 8735</b>	Due no later than May 31, 2005	2. Registered Agent and Address (NO PO BOX)
Return to:	Annual Report Form	CARRIE KRIEBS
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.	1220 N 10TH EAST MOUNTAIN HOME ID 83647 0000
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	KRIEBS' HWY 30 AUTO RECYCLING, LLC CARRIE KRIEBS 960 SUNSET STRIP	MOUNTAIN HOME ID 63647 0000
	MOUNTAIN HOME ID 83647 0000	3. <u>New</u> Registered Agent Signature:*
NO FILING FEE IF RECEIVED BY DUE DATE		
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.		
Office Held Name	Street or PO Address	City State Country Postal Code
MANAGER CARRIE KRII	EBS 960 SUSENT STRIP	MOUNTAIN HOME ID 83647
5. Organized Under the Laws of:	6. Annual Report must be signed.*	
IDAHO	Signature: Carrie Kriebs	Date: 06/16/2005
W 8735	Name (type or print): Carrie Kriebs	Title: member
Processed 06/16/2005 * Electronically provided signatures are accepted as original signatures.		