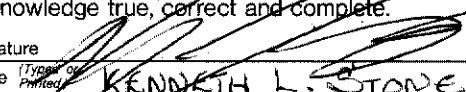
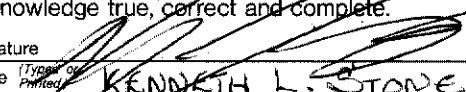
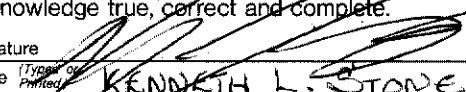


**INSTRUCTIONS ON REVERSE SIDE**

ISSUED: 07-05-1994

<b>No.</b> 153	<b>Idaho Limited Liability Company Annual Report Form</b>		2. Registered Agent and Office <b>NOT A P.O. BOX</b>											
Return To  <b>Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080</b>  * FIRST NOTICE * NO FEE REQUIRED	Due No Later Than November 1, 1994		KEN STONE 1920 INDIAN CREEK LANE  CALDWELL ID 83605											
	1. Mailing Address — <i>Please Complete If Not Current</i>  MITCH'S REPAIR OF CALDWELL, LLC KEN STONE 1920 INDIAN CREEK LANE  CALDWELL ID 83605													
4. Names and Addresses of <input type="checkbox"/> Managers or <input checked="" type="checkbox"/> Member (check one)			<b>MUST BE PRINTED OR TYPED</b>											
<table border="0"> <tr> <td><u>Name</u></td> <td><u>Street or P.O. Address</u></td> </tr> <tr> <td>MITCH'S REPAIR, Inc.</td> <td>201 WEST AVE. B</td> </tr> </table>			<u>Name</u>	<u>Street or P.O. Address</u>	MITCH'S REPAIR, Inc.	201 WEST AVE. B	<table border="0"> <tr> <td><u>City</u></td> <td><u>State</u></td> <td><u>Zip</u></td> </tr> <tr> <td>JEROME</td> <td>ID.</td> <td>83338</td> </tr> </table>		<u>City</u>	<u>State</u>	<u>Zip</u>	JEROME	ID.	83338
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MITCH'S REPAIR, Inc.	201 WEST AVE. B													
<u>City</u>	<u>State</u>	<u>Zip</u>												
JEROME	ID.	83338												
5. Signature of the Current Registered Agent (if changed in block 2)		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.  <table border="0"> <tr> <td>Signature</td> <td>Date</td> </tr> <tr> <td>             Name <small>(Type or Print)</small> KENNETH L. STONE         </td> <td>8-10-94</td> </tr> </table>			Signature	Date	 Name <small>(Type or Print)</small> KENNETH L. STONE	8-10-94						
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