



STATE OF ARIZONA **CORPORATION COMMISSION CORPORATION ANNUAL REPORT** & CERTIFICATE OF DISCLOSURE



DUE ON OR BEFORE 05/25/1998

12. Engineering

15, Health Care

16. Hotel/Motel

___ 18. Insurance ___ 19. Legal Services

17. Import/Export

13. Entertainment

14. General Consulting

FILING FEE \$45.00

12. __ Hospital/Health Care

15. __ Homeowner's Association

16. ___Professional, commercial

industrial or trade association

__ Agricultural

14. ___ Animal Husbandry

13.

17. __ Other_

Stat SUE	following information is required by utes, Title 10. The Commission's authomitted on THIS ORIGINAL FORM.	ority to prescribe t Make changes or o	his form is A.R	.S. §10-121.A.	& §10-2545.A. Y	OUR REPORT MUST
1.	SONORAN DESIGN GRO 3530 N ORACLE RD # TUCSON, AZ 85705					•
	Business Phone: State of Domicile: ARIZONA	(Busine	ation File Nu ss phone is option f Corporation	nal.)		-077509 6 -0
2.	Arizona Statutory Agent:				RE	ECEIVED
	Street Address: (NOT P.O. BOX)		ACLE RD #	116	A	PR 2 9 1998
	City, State, Zip: ACC USE ONLY Fee \$ Perialty \$ Reinstate \$ Expedite \$ Total \$	If appointing a pappointment by	We, (corporati new Statutory	ion or limited li Agent, do here suant to law.	agent MUSTOR	his appointment until
	FY97-98	Signature			MAD O T 100	A
3. \$	Secondary Address: (Foreign Corporations are REQUIRED to complete this section.)			ARIZO	MAR 2 3 199 DNA CORP. COMMI RPORATIONS DIVIS	iesiot:
4.	2. Advertising 21. I 3. Aerospace 22. I 4. Agriculture 23. I 5. Architecture 24. I 6. Banking/Finance 25. I 7. Barbers/Cosmetology 26. I 8. Construction 27. I 9. Contractor 28. I 10. Credit/Collection 29. S		· · · · · · · · · · · · · · · · · · ·	NON-Pi 1 2 3 4 5 6 7 8 9	NESS of your of ROFIT CORPORAT Charitable Benevolent Educational Civic Political Religious Social Literary Cultural Athletic Science/Passarch	•

31. Technology(Computers)

34. Tourism/Convention Services

37. Veterinary Medicine/Animal Care

Design

32. Technology(General)

33. Television/Radio

35. Transportation

36. Utilities

Number of	Shares/Certificates Authorized	Commen	Series Within class (if any)		
humbar of	Shares/Certificates Issued	Class	Series Within Class (if any)		
number or	Snares/Cerunicales issued		• •		
	V				
ist shareh	IOLDERS: (Business Corporations olders holding more than 20% of a nterest in the corporation.		QUIRED to complete this section.) se corporation, or having more than a 20%		
	Name:	Name	2:		
IONE 🗖	Name:	Name	9:		
OFFICE	RS (if no changes since last rep				
iame:	GARY H MORRELL	Name:			
itie:	PRESIDENT/CEO				
	931 E 7TH ST				
	THESON AT 85719-				
— ate taking		Date takir	og office		
lame:	omos. <u></u>	NI	ANNA LOUISE MORRELL		
itie:	· · · · · · · · · · · · · · · · · · ·	Title:	TREASURER		
_			931 E 7TH ST		
			TUCSON, AZ 85719-		
— ale takino	office:	Daje takir	na office, 04-25-96		
	, 	-			
. <u>DIRECT</u>	ORS Must List a Minimum of 1	Director.	_		
Vame: 🔓	thing Louise mak	Name:	Name: Gay H. Mcelell		
ddress:	731 E 7th Street	Address:	Address: 931 E. 7th		
I	Usch AZ 85719		TUCSCH, AZ 85719		
Date taking	office: 4-25-96	Date takir	ng office: 4-25-96		
lame:		Name:	- 		

Please Enter Corporation Name:	Page 3							
9. <u>FiNANCIAL DISCLOSURE</u> (A.R.S. §§10-1622.B & 10-2501.A.6) Only corporations that meet one or more of the following criteria must <u>attach</u> a financial statement (balance sheet including assets, liabilities and equity). The corporation is: 1) a <u>public service corporation</u> (e.g., public utility) as defined in Article XV, Section 2, Constitution of Arizona. 2) offers its <u>stock for sale</u> in transactions that are not exempt from A.R.S. §§ 44-1841 and 44-1842 as prescribed in §44-1844.A.1 (e.g., publicly traded). 3) a <u>nonprofit corporation</u> . All other forms of corporations are exempt from filling a financial disclosure.								
10. CERTIFICATE OF DISCLOSURE (A.R.S. §§ 10-1622.A.8 & 10-2505.A) Has ANY person serving either by election or appointment as an officer, director, trustee, incorporator and person controlling or holding more than 10% of the issued and outstanding common shares or 10% of any other proprietary, beneficial or membership interest in the corporation been:								
 Convicted of a felony involving a transaction in securities, consumer fraud or antitrust in any state or federal jurisdiction within the seven year period immediately preceding the execution of this certificate? Convicted of a felony, the essential elements of which consisted of fraud, misrepresentation, theft by false pretenses or restraint of trade or monopoly in any state or federal jurisdiction within the seven year period immediately preceding execution of this certificate? Or are subject to an injunction, judgment, decree or permanent order of any state or federal court entered within the seven year period immediately preceding execution of this certificate where such injunction, judgment, decree or permanent order involved the violation of: 								
(a) fraud or registration provisions of the securities laws of that jurisdiction, or (b) the consumer fraud laws of that jurisdiction, or (c) the antitrust or restraint of trade laws of that jurisdiction?								
Che box must be marked; YES	NO 🗹							
If "YES", the following information must be submitted as an attachment to this report for each person subject to one or more of the actions stated in Items 1. through 3. above.								
 Full name and prior names used. Full birth name. Present home address. Prior addresses (for immediate preceding 7 year period). 	Date and location of birth. Social Security Number The nature and description of each conviction or judicial action; the date and location; the court and public agency involved, and the file or cause number of the case.							
11. STATEMENT OF BANKRUPTCY (A.R.S. §10-202.D.2) Has ANY person serving either by election or appointment as an officer, director, trustee, incorporator and person controlling or holding more than 20% of the issued and outstanding common shares or 20% of any other proprietary, beneficial or membership interest in the corporation served in such capacity or held a 20% interest in any other corporation during the bankruptcy, receivership, or charter revocation of the other corporation?								
One box must be marked: YES 🗇	NO D							
If YES, enter the following: Chapter	Date Filed Case Number							
# YES", the following information must be submitted as an attachment to this report for each person subject to the statement above. (1) The names and addresses of each corporation and the person or persons involved. 2) The state in which each corporation was a incorporated by transacted business. 3) The dates of corporate operation.								
12. CAUTION: Signature requirements vary according to the type of corporation. See the instruction sheet for specific rules. Annual Reports submitted with incorrect signatures will be rejected.								
I DECLARE, UNDER PENALTY OF LAW, THAT ALL CORPORATE INCOME TAX RETURNS REQUIRED BY TITLE 43 OF THE ARIZONA REVISED STATUTES HAVE BEEN FILED WITH THE ARIZONA DEPARTMENT OF REVENUE.								
I further declare under penalty of law that I (we) have examined this report and the certificate, including any attachments, and to the best of my (our) knowledge and belief they are true, correct and complete.								
Name SARY H. MORREL Date 4-15-98 Name ANHA L. MORREL Date 4-15-98								
Signature AUNAS, MONULO								
Title TREASUREN (Signator(s) must be duly authorized corporate officer(s) listed in section 7 of this report.)								