



STATE OF ARIZONA  
CORPORATION COMMISSION



BUSINESS CORPORATION ANNUAL REPORT  
& CERTIFICATE OF DISCLOSURE  
DOMESTIC

FOR FISCAL YEAR ENDING 12/31/1995

DUE ON OR BEFORE 04/15/1996

The following information is required by A.R.S. §10-125 for all general corporations organized for profit, professional corporations, and business trusts authorized to transact business in Arizona. The Commission's authority to prescribe this form is A.R.S. §10-142. MAKE CHANGES OR CORRECTIONS WHERE NECESSARY.

Corporation File: -0523287-4  
Corporation Name: YOUNG ALARM, INC.  
Address: 2432 E GRANT RD

City, State, Zip: TUCSON  
Domicile: ARIZONA  
Type: PROFIT

AZ 85719-

RECEIVED

APR 17 1996

Arizona Statutory Agent: GREGORY A RICE  
Street Address: 6561 N REGAL MANOR DR  
(NOT P.O. BOX)

ARIZONA CORP. COMMISSION  
CORPORATIONS DIVISION

City, State, Zip: TUCSON

AZ 85715-50

1. Check the one category below which best describes the CHARACTER OF BUSINESS of your corporation in Arizona.

- 8/
- |  |  |  |
|--|--|--|
| <input type="checkbox"/> 1. Accounting             | <input type="checkbox"/> 16. General Consulting  | <input type="checkbox"/> 31. Restaurant/Bar                      |
| <input type="checkbox"/> 2. Advertising            | <input type="checkbox"/> 17. Health Care         | <input type="checkbox"/> 32. Retail Sales                        |
| <input type="checkbox"/> 3. Aerospace              | <input type="checkbox"/> 18. Hotel/Motel         | <input type="checkbox"/> 33. Science/Research                    |
| <input type="checkbox"/> 4. Agriculture            | <input type="checkbox"/> 19. Import/Export       | <input type="checkbox"/> 34. Sports/Sporting Events              |
| <input type="checkbox"/> 5. Architecture           | <input type="checkbox"/> 20. Insurance           | <input type="checkbox"/> 35. Tax Services                        |
| <input type="checkbox"/> 6. Attorneys at Law       | <input type="checkbox"/> 21. Legal Services      | <input type="checkbox"/> 36. Technology (Computer)               |
| <input type="checkbox"/> 7. Banking/Finance        | <input type="checkbox"/> 22. Manufacturing       | <input type="checkbox"/> 37. Technology (General)                |
| <input type="checkbox"/> 8. Barbers/Cosmetology    | <input type="checkbox"/> 23. Medicine/Dentistry  | <input type="checkbox"/> 38. Television/Radio                    |
| <input type="checkbox"/> 9. Construction           | <input type="checkbox"/> 24. Mining              | <input type="checkbox"/> 39. Tourism/Convention Services         |
| <input checked="" type="checkbox"/> 10. Contractor | <input type="checkbox"/> 25. News Media          | <input type="checkbox"/> 40. Transportation                      |
| <input type="checkbox"/> 11. Credit/Collection     | <input type="checkbox"/> 26. Pharmaceutical      | <input type="checkbox"/> 41. Utilities                           |
| <input type="checkbox"/> 12. Education             | <input type="checkbox"/> 27. Publishing/Printing | <input type="checkbox"/> 42. Veterinary Medicine/<br>Animal Care |
| <input type="checkbox"/> 13. Engineering           | <input type="checkbox"/> 28. Ranching/Livestock  | <input type="checkbox"/> 43. Other _____                         |
| <input type="checkbox"/> 14. Entertainment         | <input type="checkbox"/> 29. Real Estate         |  |
| <input type="checkbox"/> 15. Farming               | <input type="checkbox"/> 30. Resort              |  |

ACC USE ONLY	
Fee	\$ 45
Penalty	\$
Total	\$

2. NUMBER OF EMPLOYEES: Please check one. (For statistical purposes only.)

25 or Less ☒

26 - 100 ☐

101 - 500 ☐

Over 500 ☐

3. ~ If appointing a new statutory agent, the new agent MUST consent to that appointment by signing below ~ ~  
~ and PRESIDENT or VICE PRESIDENT must sign page 4 of this report. ~ ~

I, (individual) or We, (corporation) having been designated the new Statutory Agent, do hereby consent to this appointment until my removal or resignation pursuant to law.

Statutory Agent Name

Address

Signature

City, State, Zip

4. **CAPITALIZATION:** (NOTE: Business Trusts must indicate the number of transferable certificates held by trustees evidencing their beneficial interest in the trust estate.)

Number of Shares Authorized	Class	Series	Par Value

Number of Shares Issued	Class	Series	Par Value

-- PLEASE MAKE CORRECTIONS ON A SEPARATE SHEET --

5. **OFFICERS** (If no changes since last report, check here ☐ and go on to Section 6.)

<b>PRESIDENT:</b>	GREGORY A RICE	<b>VICE PRESIDENT:</b>	MATTHEW C YOUNG
Address:	6561 N REGAL MANOR DR	Address:	6561 N REGAL MANOR DR
	TUCSON, AZ 85715-		TUCSON, AZ 85715-
Date taking office:	06-18-90	Date taking office:	06-18-90
<b>SECRETARY:</b>	MATTHEW C YOUNG	<b>TREASURER:</b>	GREGORY A RICE
Address:	6561 N REGAL MANOR DR	Address:	6561 N REGAL MANOR DR
	TUCSON, AZ 85715-		TUCSON, AZ 85715-
Date taking office:	06-18-90	Date taking office:	06-18-90

6. **DIRECTORS** (If no changes since last report, check here ☐ and go on to Section 7.)

<b>NAME:</b>	GREGORY A RICE	<b>NAME:</b>	
Address:	6561 N REGAL MANOR DR	Address:	
	TUCSON, AZ 85715-		
Date taking office:	06-18-90	Date taking office:	
<b>NAME:</b>		<b>NAME:</b>	
Address:		Address:	
Date taking office:		Date taking office:	

7. **SHAREHOLDERS** of record holding more than 20% of any class of shares issued by the corporation or having more than 20% beneficial interest in the corporation. If none, so state.

(If no changes since last report, check here ☐ and go on to Section 8.)

NAME	MATTHEW C YOUNG	NAME	GREGORY A RICE
NAME		NAME	

(1995)

YOUNG ALARM, INC

0523287-4

86-0664095

Page 4

Schedule L

## Balance Sheets

	Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)
<b>Assets</b>				
Notes and accounts receivable	59,000	6,803	39,000	8,804
Less allowance for bad debts		59,000		39,000
Inventories		36,500		7,000
U.S. Government obligations				
Tax-exempt securities				
Other current assets (attach schedule)				
Loans to shareholders				231,500
Mortgage and real estate loans				
Other investments (attach schedule)				
10a Buildings and other depreciable assets	296,813		298,313	
b Less accumulated depreciation	73,045	223,768	93,408	204,905
11a Depletable assets				
b Less accumulated depletion				
12 Land (net of any amortization)		15,000		15,000
13a Intangible assets (amortizable only)				
b Less accumulated amortization				
14 Other assets (attach schedule)				
15 Total assets		341,071		506,209
<b>Liabilities and Shareholders' Equity</b>				
16 Accounts payable		46,500		75,040
17 Mortgages, notes, bonds payable in less than 1 year				
18 Other current liabilities (attach schedule)				
19 Loans from shareholders				
20 Mortgages, notes, bonds payable in 1 year or more		424,844		416,839
21 Other liabilities (attach schedule)				
22 Capital stock		2,000		2,000
23 Paid-in or capital surplus				
24 Retained earnings		-132,273		12,330
25 Less cost of treasury stock		( )		( )
26 Total liabilities and shareholders' equity		341,071		506,209

## Schedule M-1

**Reconciliation of Income (Loss) per Books With Income (Loss) per Return** (You are not required to complete this schedule if the total assets on line 15, column (d), of Schedule L are less than \$25,000.)

1 Net income (loss) per books	144,603	5 Income recorded on books this year not included on Schedule K, lines 1 through 6 (itemize):	
2 Income included on Schedule K, lines 1 through 6, not recorded on books this year (itemize):		a Tax-exempt interest \$	
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 11a, 15e, and 16b (itemize):		6 Deductions included on Schedule K, lines 1 through 11a, 15e, and 16b, not charged against book income this year (itemize):	
a Depreciation \$		a Depreciation \$	
b Travel and entertainment \$			
4 Add lines 1 through 3	144,603	7 Add lines 5 and 6	0
		8 Income (loss) (Schedule K, line 23), Line 4 less line 7	144,603

## Schedule M-2

**Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed** (see page 22 of the instructions)

	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
1 Balance at beginning of tax year			
2 Ordinary income from page 1, line 21			
3 Other additions			
4 Loss from page 1, line 21			
5 Other reductions . . . . . SEE STATEMENT 4			
6 Combine lines 1 through 5	144,603		
7 Distributions other than dividend distributions			
8 Balance at end of tax year. Subtract line 7 from line 6	144,603		

CLIENT  
FILE COPY

**9.A. CERTIFICATE OF DISCLOSURE (A.R.S. §10-128)**

Has any person serving either by election or appointment as officers, directors, trustees, incorporators and persons 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:

1. 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;
2. Been 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;
3. Been 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:
  - (a) involved the violation of fraud or registration provisions of the securities laws of that jurisdiction, or
  - (b) involved the violation of the consumer fraud laws of that jurisdiction, or
  - (c) involved the violation of the antitrust or restraint of trade laws of that jurisdiction?

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.

- |   |   |
|---|---|
| 1. Full name and prior names used.                          | 5. Date and location of birth.  |
| 2. Full birth name.   | 6. Social Security Number   |
| 3. Present home address.                                    | 7. 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. |
| 4. Prior addresses (for immediate preceding 7 year period). |   |

**9.B. STATEMENT OF BANKRUPTCY (A.R.S. §10-128.01)**

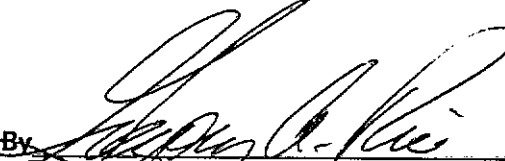
Are you currently in federal bankruptcy proceedings, and if so, under which chapter of federal bankruptcy law is the action filed and on what date?

Yes \_\_\_\_\_ Chapter \_\_\_\_\_ Date Filed \_\_\_\_\_ Case Number \_\_\_\_\_ No ☒

10. This report must be executed by the corporation and attested by its president, a vice-president, secretary, assistant secretary or treasurer. (If the corporation is in the hands of a receiver or trustee, it shall be executed on behalf of the corporation.)

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.

By  Date 4-15-96 By \_\_\_\_\_ Date \_\_\_\_\_  
Title President Title \_\_\_\_\_