



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: -0228838-4  
Corporation Name: E. D. SMITH PAVING, INC.  
Address: 4531 W CORRINE DR

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

AZ 85304-

RECEIVED

SEP 16 1996

ARIZONA CORP COMMISSION  
CORPORATIONS DIVISION

Arizona Statutory Agent: FRANCES J HAYNES  
Street Address: 3101 N CENTRAL AVE #720  
(NOT P.O. BOX)

City, State, Zip: PHOENIX

AZ 85012-

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

- |  |  |  |
|--|--|--|
| <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              |  |

PD w/EXT 10/15/96

ACC USE ONLY	
Fee	\$ _____
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
1,000,000	COMMON		\$1.00

Number of Shares Issued	Class	Series	Par Value
1,000	COMMON		\$1.00

-- PLEASE MAKE CORRECTIONS ON A SEPARATE SHEET --

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

PRESIDENT: E D SMITH

Address: 4531 W CORRINE AVE  
GLENDAL, AZ 85304  
~~XXXXXXXX XX XXXXX~~

Date taking office: 01-01-91

VICE PRESIDENT: TODD P. SMITH

Address: 17801 N. 48TH AVE.  
GLENDAL, AZ 85308

Date taking office: 01-01-91

SECRETARY: MADELYN SMITH

Address: 4531 W CORRINE AVE  
GLENDAL, AZ 85304  
~~XXXXXXXX XX XXXXX~~

Date taking office: 01-01-91

TREASURER: ~~XXXXXXXXXX~~ MADELYN SMITH

Address: 4531 W CORRINE AVE  
GLENDAL, AZ 85304  
~~XXXXXXXX XX XXXX-~~

Date taking office: 01-01-91

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

NAME: E D SMITH

Address: 4531 W CORRINE AVE  
GLENDAL, AZ 85304  
~~XXXXXXXXXX XXXXX~~

Date taking office: 01-01-91

NAME: MADELYN SMITH

Address: 4531 W CORRINE AVE  
GLENDAL, AZ 85304  
~~XXXXXXXX XX XXXXX~~

Date taking office: 01-01-91

NAME: \_\_\_\_\_

Address: \_\_\_\_\_

Date taking office: \_\_\_\_\_

NAME: \_\_\_\_\_

Address: \_\_\_\_\_

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 E D SMITH

NAME \_\_\_\_\_

NAME MADELYN SMITH

NAME \_\_\_\_\_

# KLECKA, WILKINS & KLECKA

• CERTIFIED PUBLIC ACCOUNTANTS •

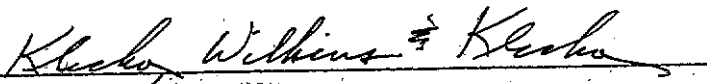
Daniel E. Klecka, CPA  
Harry F. Wilkins III, CPA  
Michael J. Klecka, CPA

E.D. Smith Paving, Inc.  
4531 W. Corrine Drive  
Glendale, AZ 85304

We have compiled the accompanying statement of financial condition - balance sheet - cash basis included in section 8 of the accompanying prescribed Annual Report of the Arizona Corporation Commission of E.D. Smith Paving, Inc. as of December 31, 1995, in accordance with Statement on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants. The financial statement has been prepared on the cash basis of accounting, which is a comprehensive basis of accounting other than generally accepted principles.

Our compilation was limited to presenting in the form prescribed by the Arizona Corporation Commission information that is the representation of management. We have not audited or reviewed the statement of financial condition - balance sheet referred to above and, accordingly, do not express an opinion or any other form of assurance on it.

The statement of financial condition - balance sheet is presented in accordance with the requirements of the Arizona Corporation Commission which differs from generally accepted accounting principles. Accordingly, this statement of financial condition - balance sheet is not designed for those who are not informed about such differences.



Phoenix, Arizona  
June 27, 1996

**8. STATEMENT OF FINANCIAL CONDITION** (Required by A.R.S. §10-125.A.9.)

Complete the following Balance Sheet; OR

- attach a copy of Schedule L, Form 1120 filed with either the Internal Revenue Service or Arizona Department of Revenue; OR
- attach a copy of the corporation's financial statement as provided to shareholders pursuant to A.R.S. §10-052.E. Books and Records; OR
- attach a copy of your Financial Report to Shareholders as required by A.R.S. §10-127; OR
- If no business conducted this fiscal year, so state.

**BALANCE SHEET**

**ASSETS**

**Current Assets:**

Cash	\$ 19,057
Trade notes and accounts receivable (less allowance for bad debts)	124,050
Inventories	2,906
Other current assets	

Total Current Assets \$ 146,013

**Investments**

Land, buildings and other fixed assets (net of accumulated depreciation)	65,098
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Intangible assets (net of amortization)

Loans to shareholders

Other assets

3,084

Total Assets \$ 214,195

**LIABILITIES AND OWNERS' EQUITY**

**Current Liabilities:**

Accounts Payable	\$ 63,516
Mortgages, notes, bonds (payable in less than 1 year)	8,621
Other current liabilities	43,408

Total current liabilities \$ 115,545

Mortgages, notes, bonds  
(payable in more than 1 year)

Loans from shareholders

Other liabilities

19,433

34,256

Total Liabilities \$ 169,234

Capital stock: (a) Preferred stock  
(b) Common stock

1,000

1,000

9,000

Paid-in-or capital surplus

Less cost of treasury stock

Retained earnings

34,961

Total Capital \$ 44,961

TOTAL LIABILITIES AND EQUITY \$ 214,195

**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 X

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 X

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 [Signature] Date 9-13-96 By [Signature] Date 9-13-96  
Title [Signature] Title Sec/Treas