

2.

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



DUE ON OR BEFORE 05/22/1999

FY98-99

FILING FEE \$45.00

The following information is required by A.R.S. §10-1622 & §10-11622 for all corporations organized pursuant to Arizona Revised Statutes, Title 10. The Commission's authority to prescribe this form is A.R.S. §10-121.A. & §10-3121.A. **COMMISSIONE MUSE THE STATUTE ON THE COMMISSIONE MAKE changes or corrections where necessary. Information for the report should reflect the current status of the corporation. See Instructions for proper format. REFER TO THE INSTRUCTIONS ON PAGE 4.

-0767437-4

 SUNLAND LANDSCAPING, CORP. 8423 W DONALD DR

PEORIA, AZ 85382

Busin	ess	Phor	e:(¢	13-	825	-97	19
State	of D	omici	ie; A	RIZ	ZONA		

(Suppless please): ortions:

Type of Corporation: BUSINESS

RECEIVED

Arizona Statutory Agent:

TERRY HALMRAST

FEB - 3 2000

Street Address: (NOT P.O. BOX) City, State, Zip:

PLICINESS CORPORATIONS

GLENDALE-

-AZ-05308-

ARIZONA CORP. COMMISSION

A separating a reast statutory agent, the new agent MCST consent of that appointment by signify below:

Use this box only if appointing a new Statutory Agent

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

Signature of new Statutory Agent

3. Secondary Address:

(Foreign Couporations are REGULARED in samplets

4. Check the one category below which best describes the CHARACTER OF BUSINESS of your corporation.

DOGINESS CORE	ORA DONS
1. Accounting	20. Manufacturing
2. Advertising	21, Mining
3, Aerospace	22. News Media
4. Agriculture	23. Pharmaceutical
5. Architecture	24. Publishing/Printing
6. Banking/Finance	25. Ranching/Livestock
7. Barbers/Cosmetology	26, Real Estate
8. Construction	27. Restaurant/Bar
√ 9. Contractor	28. Retail Sales
10. Credit/Collection	29. Science/Research
11. Education	30. Sports/Sporting Events
12. Engineering	31. Technology(Computers)
13. Entertainment	32. Technology(General)
14. General Consulting	33. Television/Radio
15. Health Care	34. Tourism/Convention Services
16. Hotel/Motel	35. Transportation
17. Import/Export	36. Utilities
18. Insurance	37, Veterinary Medicine/Animal Care

NON-PROFIT CORPORATIONS
1. Charitable
2. Benevolent
3. Educational
4. Civic
5. Political
6. Religious
7. Social
8. Literary
9. Cultural
10. Athletic
11. Science/Research
12. Hospital/Health Care
13. Agricultural
14. Animal Husbandry
15. Homeowner's Association
16. Professional, commercial
industrial or trade association
17 (The

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lumber of S	hares/Certificates Authorized	Class	Series Within Class (if any)
umber of S	Shares/Certificates Issued	Class	Series Within Class (if any)
SHAREH ist shareho eneficial in	CANT WALMONST	lass of shares issued by jes since last report, c	heck here and go on to Section 7:)
	Name:	Na	me
IONE []	Between and the second of the	na en	me:
•	(If no changes since last report,		
OFFICER	PAUL W HALMRAST		
ame:	PRESIDENT/CEO	Name:	
itle:			
ddress:	4050 W MICHIGAN	Addres	s: 8423 w Donald DR
	GLENDALE, AZ 85308-		Peorla, AZ 85382
 Date taking	office: 01/22/1996	Date to	aking office:
		Name	
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vddress:		Addres	ss:
— Dete taking	office:	Date to	aking office:
			an to Soction Q)
. <u>DIRECT</u>	ORS (If no changes since last repo	IL, Check here and (D 1 / 11 1 - 1
Name: _	PAUL W HALMRAST	<u> </u>	: Paul W Halmrast
\ddress:	4050 W MICHIGAN	Addre	ss: 8423 W Donald 1)0
	GLENDALE, AZ 85308-		Peoria, AZ 8538 Z
Table to eng	office: 01/22/1996	Date t	aking office: 1/22/1996
		Name):
Чатти .			
		Addre	SS :
	ıffice:	Date 1	taking office:

skinatures 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_	Paul Hal	mrust	Date 1-10-00 Name	Date
Signatu	ire Jall		Signature	
Title	President		Title	-4 7-64bis1