

1.

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

Arizona Corporation Commission			
00127697			

DUE ON OR BEFORE	04/02/2000
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FY99-00

**FILING FEE \$10.00** 

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. YOUR REPORT MUST BE SUBMITTED ON THIS ORIGINAL FORM. 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.

F-0039843-9

NEED, INC.

12601 N CAVE CREEK RD #113

PO BOX 54541

PHOENIX, AZ 85078

RECEIVED

MAR 2 1 2000

ARIZONA CORP. COMMISSION CORPORATIONS DAMBION

Business Phone:

(Business phone is optional)

State of Domicile: CALIFORNIA

Type of Corporation: NON-PROFIT

2. Arizona Statutory Agent:

LOIS WILLIAMS

Street Address: 1519 E HELENA DR

(NOT P.O. BOX)

City, State, Zip:

PHOENIX

AZ 85022-

Use this box only if appointing a new Statutory Agent

If appointing a <u>new</u> statutory agent, the new agent MUST consent to that appointment by signing below.

l, (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 Corporations are <u>REQUIRED</u> to complete this section.)

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

BUSINESS CORPOR  1. Accounting 2. Advertising 3. Aerospace 4. Agriculture 5. Architecture 6. Banking/Finance 7. Barbers/Cosmetology 8. Construction 9. Contractor 10. Credit/Collection 11. Education 12. Engineering 13. Entertainment 14. General Consulting 15. Health Care 16. Hotel/Motel 17. Import/Export	20. Manufacturing 21. Mining 22. News Media 23. Pharmaceutical 24. Publishing/Printing 25. Ranching/Livestock 26. Real Estate 27. Restaurant/Bar 28. Retail Sales 29. Science/Research 30. Sports/Sporting Events 31. Technology(Computers) 32. Technology(General) 33. Television/Radio 34. Tourism/Convention Services 35. Transportation 36. Utilities	NON-PROFIT CORPORATIONS  1. X. 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. Other
18. Insurance 19. Legal Services	37. Veterinary Medicine/Animal Care 38. Other	17 Outd

Number of	Shares/Certificates Authorized	Close	Cada tiputa da es
. MITTINGT U	Ondress Cerumoates Authorized	Class	Series Within Class (if any)
Nor	ne		
Number of	Shares/Certificates Issued	Class	Series Within Class (if any)
	lone		
ust snaren	HOLDERS: (Business Corporations and Businolders holding more than 20% of any class on the corporation.	ness Trusts are <b>REC</b> f shares issued by th	QUIRED to complete this section.) ne corporation, or having more than a 20%
t i	Name:	Name	9:
IONE 🛛	•		
	Name:		•
. OFFICE	RS (If no changes since last report, check	here and go on	to Section 8.)
lame:	DULAL BORPUJARI	Name:	
itle:	PRESIDENT/CEO		
	12601 N CAVE CREEK DD #112	Title: _	
ddress: _	1 <del>2601 N CAVE CREEK RD #113</del> 1880コ N, L <sup>ST</sup> AVE PHOENIX, AZ <del>85022-6517</del>	Address: _	
_	85027		
ate taking	office: 08/18/1986	Data takin	g office:
_	MS LOIS WILLIAMS		RANDAL STREETER
ame:	SECRETARY	Name: _	SYLVIA MEYER TREASURER
itle:		Title:	
ddress:	1519 E HELENA DR	Address:	15 CORPORATE PK AVE
	PHOENIX, AZ 85022-		IRVINE, CA 92714-
oto tokina	office: 06/21/1996		PHOENIX AZ 85027
ate taking	omce:	Date taking	g office: 09/06/1989 03   17   2000
DIDECT	ORS (If no changes since last report, chec	k here and as s	n to Continu O l
DIRECTO			
ame:	ROBERT LEHMAN DR. KENT SHOE		· · · · · · · · · · · · · · · · · · ·
dress:	GLENDALE, AZ 85308	<u>A δ</u> R . Address:_	1519 E HELENA DR
	PHOENIX, AZ 85027-		PHOENIX, AZ 85022-
ate taking	office: 06/19/1990 03/01/1999	Data takina	g office: 06/21/1996
	• •	Date taking	DR. KENNETH MEYER
ame:	DULAL BORPUJARI	Name:	RANDALL STREETER
ldress:	12601 N CAVE CREEK RD 18807 N. IST AVE	Addrose:	15 CORPORATE PK
· · · · ·	PHOENIX, AZ 85022- 85027		2065 HALF DAY RD.
	08/18/1986		DEER FIELD, 12 60015
	office:		0 <del>9/06/1989</del>   office: <u>03/01/1999</u>

#### LIST OF OFFICERS & DIRECTORS

### Item 7. OFFICERS

DULAL BORPUJARI Name:

SYLVIA MYERS Name:

PRESIDENT/CEO Title:

Title: **TREASURER** 

18807 N. 1<sup>st</sup> AVE. Address:

Address: 18622 N. 9<sup>th</sup> AVE PHOENIX, AZ 85027

PHOENIX, AZ 85027

Date taking office:03/17/2000 Date taking office: 08/18/1986

Name:

MS. LOIS WILLIAMS

Title: **SECRETARY** 

Address: 1519 E HELENA DR.

PHOENIX, AZ 85022

Date taking office: 06/21/1996

#### **Item 8. DIRECTORS**

Name: DR. KENT SHOEMAKER Name

Address: 7843 WEST TOPEKA DR.

GLENDALE, AZ 85308

Date taking office: 03/01/1999

Name: DULAL BORPUJARI

Address: 18807 N. 1st AVE

PHOENIX, AZ 85027

Date taking office: 08/18/1986

Name: DR.KENNETH MEYER

Address: 2065 HALF DAY RD.

DEERFIELD, IL 60015

Date taking office: 03/01/1999

Name: LOIS WILLIAMS

Address: 1519 E. HELENA DR

PHOENIX, AZ 85022

Date taking office: 06/21/1996

Name: DR. KEN HORIUCHI

Address: 103 DICKINSON CT

VERNON HILLS, IL 60061

Date taking office: 03/01/1999

Name: BONNIE CHATTERJEE

Address: 18807 N. 1st AVE

PHOENIX, AZ 85027

Date taking office: 03/01/1999

## NEED, Inc Balance Sheet

As of December 30, 1999

	Dec 30, '99		
ASSETS			
Current Assets Checking/Savings			
Bank of America Bank One	144,579.00 45,087.62		
Total Checking/Savings	189,666.62		
Other Current Assets Commodities inventory-Vietnam Donated Supplies	20,000.00 602.18		
Prepaid expenses  Total Other Current Assets	324.40 20,926.58		
	210,593.20		
Total Current Assets	210,080.20		
Fixed Assets Computer equipment Depreciation Original Cost	-4,548.68 4,419.00		
Total Computer equipment	-129.68		
Office furniture & equipment			
Depreciation Original Cost Office furniture & equipment - Other	-2,092.28 2,640.00 74.89		
Total Office furniture & equipment	622.61		
Total Fixed Assets	492.93		
TOTAL ASSETS	211,086.13		
LIABILITIES & EQUITY Liabilities			
Current Liabilities Accounts Payable Accounts Payable	9,982.04		
Total Accounts Payable	9,982.04		
Other Current Liabilities Payroll Liabilities			
FICA FIT	-278.97 2,183.70		
Medicare	-79.76		
SIT	756.93		
Payroll Llabilities - Other	0.72		
Total Payroll Liabilities	2,582.62		
Total Other Current Liabilities	2,582.62		
Total Current Liabilities	12,564.66		
Total Liabilities	12,564.66		
Equity			
Net investment-prop & equip	2,711.00 84,690.69		
Retained Earnings Net Income	98,213.78		
Temporarily restricited	,		
Hope Academy Vletnam	42,015.00 20,000.00		
Total Temporarily restricted	62,015.00		
Unrestricted	-49,109.00		
Total Equity	198,521.47		
TOTAL LIABILITIES & EQUITY	211,086.13		

Please Enter Co	rporation Name:					Page 3
Only nonprofit cor	DISCLOSURE (A.R.S. §§ porations must attach a fi xempt from filing a financial	nancial staten	& 10-11622. nent (balance	A.9) sheet including	assets, liabilities and equity).	All other forms of
	(A.R.S. § 10-11622.A.6)					
This cor	poration does	does	not 🗷 հ	ave members.		
Has ANY person so than 10% of the iss	TE OF DISCLOSURE (A erving either by election or a ued and outstanding commed portion pertains to profi	ppointment as on shares or 1	an officer, dir 0% of any ott	rector, trustee, inc	corporator <u>and person controlli</u> eneficial or membership interes	ing or holding more at in the corporation
year period in 2. Convicted of a or monopoly	nmediately preceding the ex telony, the essential eleme in any state or federal jurisd to an injunction, judgment	ecution of this ints of which o iction within the decree or pe	s certificate? consisted of fra ne seven year ermanent orde	aud, misrepresen period immediate er of anv state or	in any state or federal jurisdicti tation, theft by false pretenses by preceding execution of this federal court entered within the ecree or permanent order invol	or restraint of trade certificate? e seven year period
(b) the c	or registration provisions of onsumer fraud laws of that j ntitrust or restraint of trade k	jurisdiction, or aws of that jur	isdiction?			۰ سی
Onesto	r <u>must</u> be marked:	YES [	J	NO 🗵		
If "YES", the following terms 1. through		itted as an atta	chment to this	report for each p	erson subject to one or more o	of the actions stated
<ol> <li>Full birth</li> <li>Present</li> <li>Prior add</li> </ol>	e and prior names used. name. home address. dresses (for immediate ng 7 year period).		5. 6. 7.	Date and locati Social Security The nature and date and locatio or cause numb	Number description of each conviction on the court and public agency in	r judicial action; the nvolved, and the file
Has ANY person s than 20% of the iss served in such cap	med and outstanding comm	ppointment as on shares or 2 in any other o	an officer, di 20% of any ot corporation du	rector, trustee, in her proprietary, b ring the bankrupt	corporator <u>and person controll</u> eneficial or membership interer ccy, receivership, or charter rev	st in the corporation
	x <u>must</u> be marked:		J			
(( <u>à</u> 7/58);	enter the following:	Chapter		_ Date Filed	Case Number _	
1) The names ar	owing information must ad addresses of each corp ansacted business. 3) The	oration and the	ie person or	persons involved	nt for each person subject to the 2). The state in which each	re statement above corporation was a)
12. <u>SIGNATUR</u>	<u>ES</u>					
	<u>ON:</u> Annual Reports mu res will be rejected.	ist be signe	d by a duly	authorized offic	er. Annual Reports submil	ted with incorrect
I DECLARE, UND REVISED STATU	ER PENALTY OF LAW, TH. JTES HAVE BEEN FILED	AT ALL CORF WITH THE AF	PORATE INCO RIZONA DEP	ME TAX RETUR ARTMENT OF R	NS REQUIRED BY TITLE 43 EVENUE	OF THE ARIZONA
the best of my (	our) knowledge and belie	f they are tru	e, correct an	d complete.	certificate, including any at	
Name Dul	AL BORPUJAR	<u>   Date 3</u>	- 20-00 Na	me_ <u>L01S</u>	WILLIAMS D	ate <u>3 - 20 - 00</u>
Signature	Tuld Sagrage 1		Sig	nature dora	Williams	
Title PRE	SIDENT (Signator(s) must be o	luly authorize	Ti	tle <u>for ke</u> officer(s) listed	in section 7 of this report.)	