



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

Arizona Corporation Commission



DUE ON OR BEFORE 04/14/2003

FY02-03

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.

1. -0715984-4

SONORA ENVIRONMENTAL RESEARCH INSTITUTE, INC.
PO BOX 65782
TUCSON, AZ 85728-5782

RECEIVED

APR 14 2003

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

Business Phone: _____

(Business phone is optional.)

State of Domicile: **ARIZONA**

Type of Corporation: **NON-PROFIT**

2. Statutory Agent: **ANN MARIE A WOLF**

Physical Address, If Different.

Mailing Address: **5631 N VIA SALEROSA**

Physical Address:

City, State, Zip: **TUCSON, AZ 85750**

City, State, Zip:

ACC USE ONLY

Fee \$ 10

Penalty \$ _____

Reinstate \$ _____

Expedite \$ _____

Resubmit \$ _____

Use this box only if appointing a new Statutory Agent

If appointing a new statutory agent, the new agent **MUST** consent to that appointment by signing below.

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

576033
3. Secondary Address:

(Foreign Corporations are
REQUIRED to complete
this section.)

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

BUSINESS CORPORATIONS

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

NON-PROFIT CORPORATIONS

- | |
|--|
| <input checked="" type="checkbox"/> 1. Charitable |
| <input type="checkbox"/> 2. Benevolent |
| <input type="checkbox"/> 3. Educational |
| <input type="checkbox"/> 4. Civic |
| <input type="checkbox"/> 5. Political |
| <input type="checkbox"/> 6. Religious |
| <input type="checkbox"/> 7. Social |
| <input type="checkbox"/> 8. Literary |
| <input type="checkbox"/> 9. Cultural |
| <input type="checkbox"/> 10. Athletic |
| <input type="checkbox"/> 11. Science/Research |
| <input type="checkbox"/> 12. Hospital/Health Care |
| <input type="checkbox"/> 13. Agricultural |
| <input type="checkbox"/> 14. Animal Husbandry |
| <input type="checkbox"/> 15. Homeowner's Association |
| <input type="checkbox"/> 16. Professional, commercial
industrial or trade association |
| <input type="checkbox"/> 17. Other _____ |

5. CAPITALIZATION: (Business Corporations and Business Trusts are **REQUIRED** to complete this section.)

Business trusts must indicate the number of transferable certificates held by trustees evidencing their beneficial interest in the trust estate. Please examine the corporation's original Articles of Incorporation for the amount of **shares authorized**. Review all corporation amendments to determine if the original number of shares has changed. Examine the corporation's minutes for the number of **shares issued**. **Please Print or Type Clearly.**

Number of Shares/Certificates Authorized Class Series Within Class (if any)

Number of Shares/Certificates Issued Class Series Within Class (if any)

6. SHAREHOLDERS: (Business Corporations and Business Trusts are **REQUIRED** to complete this section.)

List shareholders holding more than 20% of any class of shares issued by the corporation, or having more than a 20% beneficial interest in the corporation. **Please Type or Print Clearly.**

Name: _____ Name: _____

NONE ☐

Name: _____ Name: _____

7. OFFICERS Please Type or Print Clearly. You Must List at Least One.

Name: Ann Marie Wolf

Name: Lori Kettler

Title: President

Title: Vice President

Address: 5631 N. Via Salerosa
Tucson, AZ 85750

Address: 1040 Brandon Apt. #5
Norfolk, VA 92507

Date taking office: 4/1/1997

Date taking office: 4/1/1997

Name: Anna H. Spitz

Name: Anna H. Spitz

Title: Secretary

Title: Treasurer

Address: 7601 E. Ventana Vista Court
Tucson, AZ 85750

Address: 7601 E. Ventana Vista Court
Tucson, AZ, 85750
7601 E. Ventana

Date taking office: 4/1/1997

Date taking office: 4/1/1997

8. DIRECTORS Please Type or Print Clearly. You Must List at Least One.

Name: Ann Marie Wolf

Name: Lori Kettler

Address: 5631 N. Via Salerosa
Tucson, AZ 85750

Address: 1040 Brandon, Apt. #5
Norfolk, VA 92507

Date taking office: 4/1/1997

Date taking office: 4/1/1997

Name: Anna H. Spitz

Name: Jaagun Ruiz

Address: 7601 E. Ventana Vista Court
Tucson, AZ 85750

Address: 1021 Via Linterna
Tucson, AZ 85718

Date taking office: 4/1/1997

Date taking office: 4/1/1997

Sonora Environmental Research Institute, Inc.

File Number: 0715984-4

#8 Directors

Gonzalo Rivera

6303 E. Tanque Verde Rd. #260

Tucson, AZ 85715

Date Taking Office: 4/1/1997

Balance Sheet
As of 12/31/02

Accounts	12/31/02 Balance
Assets	
Cash and Bank Accounts	
Anna	0.00
AnnMarie	0.00
Checking	8,608.05
Dave	0.00
New Checking	0.00
Petty Cash	71.29
Total Cash and Bank Accounts	8,679.34
Other Assets	
Capital Equip	2,052.77
Inventory	1,445.00
Receivables	3,543.00
Total Other Assets	7,040.77
Total Assets	15,720.11
Liabilities & Equity	
Liabilities	
Other Liabilities	
FICA	209.68
FTW	19.00
Medicare	41.40
Sales Tax	0.00
STW	134.12
Total Other Liabilities	404.20
Total Liabilities	404.20
Equity	15,315.91
Total Liabilities & Equity	15,720.11

Ann Marie Wing
4/14/03

Income Statement
1/1/02 Through 12/31/02

Category	1/1/02- 12/31/02
Inc/Exp	
Income	
Grants	94,406.90
Projects	3,000.00
Sales	9.50
Workstudy	5,584.49
	<hr/>
Total Income	103,000.89
Expenses	
Benefits:	
Dental:	
Wolf	153.96
	<hr/>
Total Dental	153.96
Health:	
Wolf	1,531.00
Zavodska	1,324.00
	<hr/>
Total Health	2,855.00
Life:	
Zavodska	76.00
	<hr/>
Total Life	76.00
	<hr/>
Total Benefits	3,084.96
Books	59.95
Conference	25.00
Consultant:	
Ortega	400.00
Ossa	100.00
Reisig	3,052.00
Wolf	12,770.00
	<hr/>
Total Consultant	16,322.00
Copying-Faxxing	27.12
Equipment:	
Depreciation	1,025.20
	<hr/>
Total Equipment	1,025.20
Gift	54.25
Government Fee	10.00
Insurance	500.00
Internet	312.78
Legal Fee:	
Patent	12,672.25
	<hr/>
Total Legal Fee	12,672.25

Income Statement
1/1/02 Through 12/31/02

Category	1/1/02- 12/31/02
Meeting	541.92
Membership	30.00
Payroll:	
FICA:	
Overtime	45.79
Vacation	18.60
FICA - Other	2,154.83
Total FICA	2,219.22
Gross:	
Overtime	738.00
Vacation	300.00
Gross - Other	34,754.50
Total Gross	35,792.50
Medicare:	
Overtime	10.71
Vacation	4.35
Medicare - Other	503.94
Total Medicare	519.00
Total Payroll	38,530.72
Postage	241.55
Printing	128.05
ProServices:	
Analysis	9,000.00
ProServices - Other	810.00
Total ProServices	9,810.00
Rent:	
Equipment	106.53
Office	5,595.00
P.O. Box	38.00
Total Rent	5,739.53
Shipping	3.95
Supplies:	
Laboratory	4,151.09
Office	4,252.34
Samples	141.49
Training	40.18
Supplies - Other	156.14
Total Supplies	8,741.24
Telephone	1,659.29
Travel:	
Meals	205.69

Income Statement
1/1/02 Through 12/31/02

Category	1/1/02- 12/31/02
Mileage	3,142.92
Transportation	168.00
Total Travel	3,516.61
Expenses - Other	0.00
Total Expenses	103,036.37
Total Inc/Exp	-35.48

Donna W
4/14/03

9. FINANCIAL DISCLOSURE (A.R.S. §10-11622.A.9)

Nonprofit corporations **must attach** a financial statement (e.g. income/expense statement, balance sheet including assets, liabilities). All other forms of corporations are exempt from filing a financial disclosure.

9A. MEMBERS (A.R.S. § 10-11622.A.6) Only Nonprofit Corporations must answer this question.

This corporation **DOES** ☐ **DOES NOT** ☒ have members.

10. CERTIFICATE OF DISCLOSURE (A.R.S. §§10-1622.A.8 & 10-11622.A.7)

Has ANY person serving either by election or appointment as an officer, director, trustee, incorporator and/or 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: [Underlined portion pertains to business corporations only]

1. 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. 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. 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?

One 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.

- | | |
|---|---|
| 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). | |

11. STATEMENT OF BANKRUPTCY, RECEIVERSHIP or CHARTER REVOCATION (A.R.S. §§10-202.D.2, 10-3202.02, 10-1623 & 10-11623)

A) Has the corporation filed a petition for bankruptcy or appointed a receiver? One box **must** be marked: **YES** ☐ **NO** ☒

B) Has ANY person serving either by election or appointment as an officer, director, trustee, incorporator and/or 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? [Underlined portion pertains to business corporations only]

One box **must** be marked:

YES ☐



NO ☒

If "YES" to A and/or B, 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. (e.g. officer, director, trustee or major stockholder)
2. The state in which each corporation was a) incorporated b) transacted business.
3. The dates of corporate operation.
4. If any involved person (listed in #1) has been involved in any other bankruptcy proceeding within the past year, the name and address of each corporation.
5. Date, Case number and Court where the bankruptcy was filed or receiver appointed.
6. Name and address of court appointed receiver.

12. SIGNATURES: Annual Reports must be signed and dated by at least one duly authorized officer or they 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 <u>Ann Marie Wolf</u>	Date <u>4/13/03</u>	Name <u>ANNA H. SPITZ</u>	Date <u>4/14/03</u>
Signature <u></u>		Signature <u></u>	
Title <u>President</u>		Title <u>SECRETARY - TREASURER</u>	

(Signator(s) must be duly authorized corporate officer(s) listed in section 7 of this report.)