

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



- 1916

DUE ON OR BEFORE 06/18/2005

FY04-05

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. 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 on page 4 for proper format.

1. -1035076-7
RON HERNANDEZ TRANSPORT, INC. 2310 W STELLA LN
PHOENIX, AZ 85015

Business Phone: 602989363 (Business phone is optional.)

State of Domicile: ARIZONA Type of Corporation: BUSINESS

2. Statutory Agent: RON HERNANDEZ Mailing Address: 2310 W STELLA LN City, State, Zip: PHOENIX, AZ 85015

Physical Address, If Different.

Physical Address: City, State, Zip:

ACC USE ONLY	Use this box only if appointing a new Statutory Agent
Fee \$ 45 Como 1.50	If appointing a <u>new</u> statutory agent, the new agent MUST consent to that appointment by signing below.
Penalty \$Reinstate \$	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.
Expedite \$Resubmit \$_47^	Signature of <i>new</i> Statutory Agent
9:000:80	Printed Name of <i>new</i> Statutory Agent

(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 CORPORATIONS

NON-PROFIT CORPORATIONS

Proprietor 18 Wheeler

1. Accounting	20. Manufacturing	1, Charitable	A.C.C. CORPORATIONS DIV.
2. Advertising	21. Mining	Benevolent	RECEIVED
3. Aerospace	22. News Media	Educational	HEDEIVED
4. Agriculture	23. Pharmaceutical	4 Civic	
5. Architecture	24. Publishing/Printing	5 Political	MAY 1 A see.
6. Banking/Finance	25. Ranching/Livestock	6 Religious	MAY 1 6 2005 C
7. Barbers/Cosmetology	26. Real Estate	7 Social	
8. Construction	27. Restaurant/Bar	8 Literary	
9. Contractor	👱 28. Retail Sales	9. <u> </u>	DOCUMENTS ARE SUBJECT
10. Credit/Collection	29. Science/Research	10 Athletic	TO DEVENING AND SUBJECT
11. Education	30. Sports/Sporting Events	11 Science/Research	TO REVIEW BEFORE FILING
12. Engineering	31. Technology(Computers)	 12 Hospital/Health Ca 	re
13. Entertainment	32. Technology(General)	13 Agricultural	
14. General Consulting	33. Television/Radio	14 Animal Husbandry	
15. Health Care	34. Tourism/Convention Services	15 Homeowner's Asso	ociation
16."Hotel/Motel	35. Transportation	 16. Professional, comm 	nercial "" "
17. lmport/Export	36/Utilities	industrial or trade a	
18. Insurance	37. Veterinary-Medicine/Animal Care	17 Other	
19. Legal Services	V88. Other Irucking		

Address:

Date taking office:

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5. CAPITALIZATION: (Business Corporations and Business	· · · · · · · · · · · · · · · · · · ·
Business trusts must indicate the number of transferable ce the trust estate. Please Print or Type Clearl	ertificates held by trustees evidencing their beneficial interest in
5a. Please examine the corporation's original Articles of	f Incorporation for the amount of shares authorized.
Number of Shares/Certificates Authorized Cla	Series Within Class (if any)
100 000	umon Stock
5b. Review all corporation amendments to determine corporation's minutes for the number of shares issued to the number of shares issued to the number of shares issued to the number of shares is the	if the original number of shares has changed. Examine the ued .
Number of Shares/Certificates Issued Cla	Series Within Class (if any)
6. SHAREHOLDERS: (Business Corporations and Busines	es Truste 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.
None 🗹	Name:
	Name:
7. OFFICERS Please Type or Print Clearly,	You Must List at Least One.
Name: Kon Hemander	Name:
Title: Résident	Title:
Address: 2310 W. Stella Lane	Address:
Phx Az 85015	
Date taking office: OU/OZ	Date taking office:
Name:	Name:
Title:	Title:
Address:	Address:
Date taking office:	Date taking office:
8. DIRECTORS Please Type or Print Clearly	. You Must List at Least One.
Name: Loutander	
Address: 2310 W. Stella LL	Address:
Phx Az 85015	
Date taking office: Ole OZ	Date taking office:
Name:	Name:

Address:

Date taking office:

Please Enter Corporation Name: Ron Hernandez Transport In File number 1035016-7 Page 3				
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]				
 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? 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? 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 I NO 1				
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.				
 Full name and prior names used. Full birth name. Present home address. Prior addresses (for immediate preceding 7 year period). Full birth name. Social Security Number 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. 				
11. STATEMENT OF BANKRUPTCY, RECEIVERSHIP or CHARTER REVOCATION (A.R.S. §§10-202.D.2, 10-3202.D.2, 10-				
1623 & 10-11623) A) Has the compration filed a petition for bankruptcy or appointed a receiver? One box must be marked: YES D NO D				
A) Has the corporation filed a petition for bankruptcy or appointed a receiver? One box <u>must</u> be marked: YES D NO D B) Has any person serving as an officer, director, trustee or incorporator of the corporation served in any such capacity OR <u>held or controlled</u>				
over 20% of the issued and outstanding common shares, or 20% of any other proprietary, beneficial or membership interest in any other corporation which has been placed in bankruptcy, receivership or had its charter revoked, or administratively or judicially dissolved by any state or jurisdiction?				
[Underlined portion pertains to business corporations only] One box must be marked: YES I NO I				
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 Kon Hernandez Dateó5/16/05 Name Date				
Signature Signature Signature				
Title Fresident Title (Signator(s) must be duly authorized corporate officer(s) listed in section 7 of this report.)				