



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



AZ Corp. Commission



05307243

DUE ON OR BEFORE 03/15/2002

FT01-02

FILING FEE \$45.00

The following information is required by A.R.S. §§10-1022 & 10-11022 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. -0148753-4
ROM SWARTZ CONSTRUCTION, INC.
6733 W EVANS DR.
PHOENIX, AZ 85345

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ARIZONA CORP. COMMISSION
CORPORATION DIVISION

AMENDED

Business Phone: (Business phone optional)
State of Domicile: ARIZONA Type of Corporation: PROFIT

2. Arizona Statutory Agent: RONALD SWARTZ
Street Address: 6733 W EVANS DR.
PHOENIX, AZ 85345
City, State, Zip:

APR 13 2002
ACCU-USE
Fee \$ 45
Penalty \$
Refundable \$
Expenses \$
Residual \$

Use this box only if appointing a new Statutory Agent

I, the undersigned, hereby appoint the above agent as the new Statutory Agent for the corporation.

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:
(Current Corporation and
Commissioner's Complete
this section)

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

BUSINESS CORPORATIONS

- | | |
|------------------------|---|
| 1. Advertising | 21. Manufacturing |
| 2. Advertising | 22. News Media |
| 3. Auto Parts | 23. Pharmaceutical |
| 4. Agriculture | 24. Publishing/Printing |
| 5. Architecture | 25. Ranching/Livestock |
| 6. Banking/Finance | 26. Real Estate |
| 7. Barber/ Cosmetology | 27. Restaurant/Bar |
| 8. Construction | 28. Retail Sales |
| 9. Coal Mining | 29. Science Research |
| 10. Credit Collection | 30. Sports/Sporting Events |
| 11. Education | 31. Technology (Computer) |
| 12. Engineering | 32. Technology (General) |
| 13. Entertainment | 33. Television/Radio |
| 14. General Consulting | 34. Travel/Convention Services |
| 15. Health Care | 35. Transportation |
| 16. Import/Export | 36. Utilities |
| 17. Insurance | 37. Voluntary Nonprofit/Charitable Care |
| 18. Legal Services | 38. Other |

NON-PROFIT CORPORATIONS

- | |
|---|
| 1. Charitable |
| 2. Cemetery |
| 3. Educational |
| 4. Civic |
| 5. Political |
| 6. Religious |
| 7. Social |
| 8. Literary |
| 9. Cultural |
| 10. Athletic |
| 11. Science Research |
| 12. Hospital/Health Care |
| 13. Literary Arts |
| 14. Internal Machinery |
| 15. Homeowner's Association |
| 16. Professional, commercial, industrial or trade association |
| 17. Other |

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ARIZONA CORP. COMMISSION
CORPORATION DIVISION

6. **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.

Number of Shares/Certificates Authorized	Class	Series Within Class (if any)
1,000,000	COMMON	
Number of Shares/Certificates Issued	Class	Series Within Class (if any)
136	COMMON	

8. **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: RON SWARTZ Name: BONNIE SWARTZ
 NONE ☐ Name: Cindy Christner Name: Terry Swartz

7. **OFFICERS** Please Type or Print Clearly.

Name: <u>RONALD SWARTZ</u> Title: <u>PRESIDENT</u> Address: <u>6733 W. EVANS DRIVE</u> <u>FLORIDA, AZ 85345</u> Date taking office: <u>7-15-82</u> Name: <u>BONNIE SWARTZ</u> Title: <u>VICE-PRESIDENT</u> Address: <u>6733 W. EVANS DRIVE</u> <u>FLORIDA, AZ 85345</u> Date taking office: <u>7-15-82</u>	Name: <u>BONNIE SWARTZ</u> Title: <u>SECRETARY</u> Address: <u>6733 W. EVANS DRIVE</u> <u>FLORIDA, AZ 85345</u> Date taking office: <u>7-15-82</u> Name: <u>RONALD SWARTZ</u> Title: <u>TREASURER</u> Address: <u>6733 W. EVANS DRIVE</u> <u>FLORIDA, AZ 85345</u> Date taking office: <u>7-15-82</u>
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8. **DIRECTORS** Please Type or Print Clearly.

Name: <u>RONALD SWARTZ</u> Address: <u>6733 W. EVANS DRIVE</u> <u>FLORIDA, AZ 85345</u> Date taking office: <u>7-15-82</u> Name: _____ Address: _____ Date taking office: _____	Name: _____ Address: _____ Date taking office: _____ Name: _____ Address: _____ Date taking office: _____
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9. FINANCIAL DISCLOSURE (A.R.S. §§10-1822.B & 10-11822.A.2)

Nonprofit corporations must attach a financial statement (balance sheet including assets, liabilities and equity). All other forms of corporations are exempt from filing a financial disclosure.

9A. MEMBERS (A.R.S. § 10-11822.A.2) Nonprofit Corporations Only.

This corporation **does** ☐ **does not** ☒ have members.

10. CERTIFICATE OF DISCLOSURE (A.R.S. §§10-1822.A.3 & 10-11822.A.7)

Has ANY person serving either by election or appointment as an officer, director, trustee, incorporator and 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 profit 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?

Does not meet any of these: **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 judicialization; 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 (A.R.S. §§10-202.D.2 & 10-3202.02)

Has ANY person serving either by election or appointment as an officer, director, trustee, incorporator and 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 profit corporations only)

One has never been involved: **YES** ☐ **NO** ☒

Chapter _____ Date Filed _____ Case Number _____

Under 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. The name and address of each corporation; 2. The date of the bankruptcy, receivership, or charter revocation; 3. The name of the corporation; 4. The name of the person involved.

12. SIGNATURES

CAUTION: This report must be signed by a duly authorized officer. A signed Report submitted by a person not authorized to sign is invalid.

I DECLARE, UNDER PENALTY OF LAW, THAT ALL CORPORATE INCOME TAX RETURNS REQUIRED BY TITLE 48 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 RONALD SWARTZ Date 2.3.2015 Name BONNIE SWARTZ Date 1/20/15
 Signature [Signature] Signature [Signature]
 Title PRESIDENT Title SECRETARY

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

11/7/15 Ronald Swartz, Pres

11-7-15 Bonnie Swartz Sec.