

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
 AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
 Jul 30 1997 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # F95000004014 (5)
 1. Corporation Name
EARTH TECH CONSULTING, INC.



Principal Place of Business 100 WEST BROADWAY, SUITE 5000 LONG BEACH CA 90802-4443	Mailing Address 100 WEST BROADWAY, SUITE 5000 LONG BEACH CA 90802-4443
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/21/1995	3a. Date of Last Report 05/15/1996
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 95-2661922	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent	
				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CP	1.1 TITLE	CPD
NAME	CREEL, DIANE C	1.2 NAME	
STREET ADDRESS	100 WEST BROADWAY, SUITE 5000	1.3 STREET ADDRESS	
CITY-ST-ZIP	LONG BEACH CA 90802-4443	1.4 CITY-ST-ZIP	
TITLE	DCFO	2.1 TITLE	
NAME	EARLY, CREIGHTON K	2.2 NAME	
STREET ADDRESS	100 WEST BROADWAY, SUITE 5000	2.3 STREET ADDRESS	
CITY-ST-ZIP	LONG BEACH CA 90802-4443	2.4 CITY-ST-ZIP	
TITLE	GCS	3.1 TITLE	
NAME	ALPERT, CHARLES S	3.2 NAME	
STREET ADDRESS	100 WEST BROADWAY, SUITE 5000	3.3 STREET ADDRESS	
CITY-ST-ZIP	LONG BEACH CA 90802-4443	3.4 CITY-ST-ZIP	
TITLE	AS	4.1 TITLE	
NAME	MOROZE, M. BRIAN	4.2 NAME	
STREET ADDRESS	ONE TYCO PARK	4.3 STREET ADDRESS	
CITY-ST-ZIP	EXETER NH	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	VD
NAME	SWART, MARK H	5.2 NAME	Swartz
STREET ADDRESS	ONE TYCOPARK	5.3 STREET ADDRESS	
CITY-ST-ZIP	EXETER NH	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	V
NAME		6.2 NAME	J Brad McGee
STREET ADDRESS		6.3 STREET ADDRESS	One Tyco Park
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Exeter, NH 03933

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ SECRETARY 7/18/97

CR2E034 (4/97)