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FILED
May 13 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 # F94000003479 (2)

1. Corporation Name
ET ENVIRONMENTAL CORPORATION

Principal Place of Business
375 HUDSON ST.
NEW YORK NY 10014

Mailing Address
375 HUDSON ST.
NEW YORK NY 10014-3658



3. Date Incorporated or Qualified 07/01/1994
3a. Date of Last Report 05/01/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	13-3774375	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	28		
Zip	Country	7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
24	25	29	30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
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
FL
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)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	C/P
NAME	HERSON, EUGENE M	1.2 NAME	
STREET ADDRESS	400 S. EL CAMINO REAL, SUITE 1200	1.3 STREET ADDRESS	
CITY-ST-ZIP	SAN MATEO CA	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	CEO, D
NAME	KERSTETTER, DONALD R	2.2 NAME	
STREET ADDRESS	375 HUDSON ST.	2.3 STREET ADDRESS	ten Tenn Center, Suite 70
CITY-ST-ZIP	NEW YORK NY 10014	2.4 CITY-ST-ZIP	Philadelphia, PA 19103
TITLE	VST	3.1 TITLE	
NAME	WIDING, ROBERT G	3.2 NAME	
STREET ADDRESS	375 HUDSON ST.	3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	P
NAME	HIGGINBOTHAM, WILLIAM E	4.2 NAME	
STREET ADDRESS	1560 OAK BROOK DR., #100	4.3 STREET ADDRESS	
CITY-ST-ZIP	NORCROSS GA	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	V
NAME		5.2 NAME	EVE, Gary
STREET ADDRESS		5.3 STREET ADDRESS	230 South LaSalle Street
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Chicago, IL 60604-1496
TITLE		6.1 TITLE	
NAME		6.2 NAME	Ballew, Mark
STREET ADDRESS		6.3 STREET ADDRESS	3424 Peachtree Rd. N.E
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Atlanta, GA 30326

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 _____

CR2E034 (9/96)