

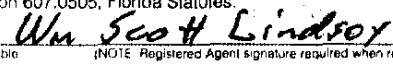


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**APPROVED
AND
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1997 MAY 12 PM 4:20

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 960000 12838 1. Corporation Name Environmental Solutions & Technology, Inc.			
Principal Place of Business 2325 West Broadway Suite A Idaho Falls, Idaho 83402		Mailing Address Same	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	
3. Date Incorporated or Qualified 02/09/96		3a. Date of Last Report N/A	
4. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
81 Name Wm. Scott Lindsey		82 Street Address (P.O. Box Number is Not Acceptable) 1407 Piedmont Drive East	
83		84 City Tallahassee	
85 Zip Code 32312		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 		SIGNATURE 	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE P/D		1.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
1.2 NAME Craig Thomas Gaudio		1.2 NAME	
1.3 STREET ADDRESS 2325 W. Broadway, Suite A		1.3 STREET ADDRESS 2325 West Broadway, Suite A	
1.4 CITY - ST - ZIP Idaho Falls, Idaho 83402		1.4 CITY - ST - ZIP Idaho Falls, Idaho 83402	
2.1 TITLE VP / S / T / D		2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
2.2 NAME Clayton H. Kass		2.2 NAME	
2.3 STREET ADDRESS 29442 Modjeska Road		2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP Modjeska, California 92667		2.4 CITY - ST - ZIP	
3.1 TITLE D		3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
3.2 NAME E. Diane Reed		3.2 NAME	
3.3 STREET ADDRESS R. D. 3		3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP Kutztown, Pennsylvania 19605		3.4 CITY - ST - ZIP	
4.1 TITLE D		4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
4.2 NAME Morgan Warren		4.2 NAME	
4.3 STREET ADDRESS 232 Arlington Street		4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP Auction, MA 01742		4.4 CITY - ST - ZIP	
5.1 TITLE		5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
5.2 NAME		5.2 NAME	
5.3 STREET ADDRESS		5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP		5.4 CITY - ST - ZIP	
6.1 TITLE		6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
6.2 NAME		6.2 NAME	
6.3 STREET ADDRESS		6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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 included 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Craig Thomas Gaudio

4/25/97

Date

904-386-2171

Daytime Phone #

CR2E034 (9/96)