## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P96000012838 1. Entity Name ENVIRONMENTAL SOLUTIONS & TECHNOLOGY, INC. 00 SEP 18 PH 3: 21 Principal Place of Business Mailing Address SECRETARY OF STATE 2325 WEST BROADWAY 2325 WEST BROADWAY TALLAHASSEE, FLORIDA SUITE A SUITE A IDAHO FALLS ID 83402 IDAHO FALLS ID 83402 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 59-32-7680 Applied For City & State 4. FEI Numbe City & State Not Applicable \$8.75 Additional Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name LINDSEY, SCOTT WM Street Address (P.O. Box Number is Not Acceptable) 1407 PIEDMONT DRIVE EAST TALLAHASSEE FL 32312 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. VICE PRESIDENT **Addition** PD ☐ Delete TITLE TITLE GAUDIO, CRAIG THOMAS NAME DIGIACOMO NAME STREET ADDRESS STREET ADDRESS 2325 W. BROADWAY, STE A METROPOLITYN CITY-ST-ZIP CITY-ST-ZIP IDAHO FALLS ID 83402 **VSTD** DTLE ☐ Change ■ Addition ☑ Delete TITLE KASS, CLAYTON H NAME NAME STREET ADDRESS STREET ADDRESS 29442 MODJESKA ROAD CITY-ST-7IP CITY-ST-ZIF MODJESKA CA 92667 1000033973<sup>8</sup>1<sup>6</sup>-001 Addition ☐ Delete TITLE TITLE NAME reed, e. Diane NAME STREET ADDRESS STREET ADDRESS R.D. 3 \*\*\*\*750.00 \*\*\*\*750.00 CITY-ST-7IP CITY-ST-ZIP **KUTZTOWN PA 19605** ☐ Change ☐ Addition ☐ Delete TITLE TITLE WARREN, MORGAN NAME STREET ADDRESS STREET ADDRESS 232 ARLINGTON STREET CITY-ST-ZIP CITY-ST-ZIP **AUCTION MA 01742** TITLE ☐ Delete THE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

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9/18/00

CBS 386-3784

Daytime Phone #