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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000100793 (4)

EARTH TECHNOLOGIES, INC.

FILED									
Jun 16 1997 8:00am									
Secretary of State									

Principal Plac	e of Business	Mailing Address 3146 MIRO DRIVE N PALM BEACH GARDENS FL 33410-1253					i (Banina) kie folio olili dalit dolik oolot lidit dalit edili kant ilili sool			
3146 MIRO DRI PALM BEACH (ve n Bardens fl 33410									
							3. Date Incorporated or Qualified 12/13/1996	3a. Dat	e of Last R	eport
	lace of Business	2a, Mailing	2a, Mailing Address				4 FEI Number		Ar	plied For
21		26							Nc	t Applicable
Sulte, Apt.		Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional Fee Required		
i City & State	9	City & State			6. Election Campaign Financing		\$5.00	May Be		
23		28					Trust Fund Contribution		Added	lo Fees
Zip	Country	Z(p Cou			, IIII CC		B. This corporation has liability for			. 199.032,
24	25	29							No	
	9. Name and Address of Curre	nt Registered Ag	jent				10. Name and Address of New Re	gistered A	gent	
	Z, DEL			81	'	Name				
	MIRO DRIVE N			82	2	Street Addre	ess (P.O. Box Number is Not Acceptate	ole)		
į Pala	A BEACH GARDENS FL 33410				1					
				83	3					
				84	1	City		FI	85 Zip	Code
11. Pursuant office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State	02 and 607.1508, e of Florida, Such	Florida Statutes change was au	the above thorized b	ve-r	named corporation	oration submits this statement for the pion's board of directors. I hereby acce	ourpose of o	t 1 changing it intment as	s registered registered
agent. Fa	m familiar with, and accept the oblig	gations of, Section	607.0505, Flori	da Statute	95.					
SIGNATURE	Signature, typed or printed name of registered ag	nord and tale if annicabl	n (NOIE:	Bonislared Ac	nent	sincelure require	ed when reinstating)	DATE		
12.		ID DIRECTORS	. (4512.1	13.	g Ciril	ograna redone	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	3S IN 12
TITLE	D		DELETE	1.1 TITLE			1,0011101101101010101010111		Change	Addition
NAME	MINTZ, DEL			1.2 NAME		1			-	_
STREET ADDRESS	A44A MIDA DONE M			1.3 STREET ADDRESS						
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410			1.4 CITY -						
TITLE	D		DELETE	2.1 TITLE					Change	Addition
NAME	MINTZ, GARY L			22 NAME						
STREET ADDRESS	30980 SHAKER BLVD			2.3 STREET ADDRESS						'
CITY-ST-ZIP	PEPPER PIKE OH 44124			2. 4 CITY - ST - ZIP						
TITLE	D DELETE			3.1 TITLE					Change	Addition
NAME	MARTY MARK			3.2 NAME					-	·
STREET ADDRESS	25017 WIMBLEDON RD			3.3 STREE		DORESS				
CITY-ST-ZIP	BEACHWOOD OH 44122			3.4. CITY-						
TITLE			DELETE	4.1 TITLE					Change	Addition
NAME				4 2 NAME				•	•	-
STREET ADDRESS				4.3 STREE		DDBESS				
CITY-ST-ZIP				4.4 CITY-		!				
TIFLE			DELETE	5.1 ¥ITL€	_				Change	Addition
NAME				5.2 NAME				•	<u>.</u>	
STREET ADDRESS				5.3 STREE		DORESS				•
CITY-ST-ZIP				5.4 CITY-		i				·
TITLE			DELETE	6.1 TITLE					Change	Addition
NAME				6.2 NAME				•		
STREET ADDRESS				6.3 STREE		DOBESS				
				6.4 CITY -		i l				
CITY-ST-ZIP				0.4 0111	31.	£17				

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 composition 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.

4-26-1997