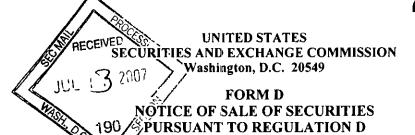
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❖ FORM D



SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



SEC USE ONLY

Prefix

Serial

DATE RECEIVED

·
Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)
Environmental Service Professionals, Inc Boca Funding, LLC
Filing Under (Check box(es) that apply): \Box Rule 504 \Box Rule 505 \underline{X} Rule 506 \Box Section 4(6) \Box ULOE
Type of Filing: X New Filing Amendment PROCESSED
A, BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)
Environmental Service Professionals, Inc.
Address of Executive Offices (Number and Street, City, State, Zip Code Telephone Number (Including ADACONO 1111 East Tahquitz Canyon Way, Suite 110, Palm Springs, California 92262 (760) 325-4171
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)(if different from
Executive Offices)
1111 East Tahquitz Canyon Way, Suite 110, Palm Springs, California 92262
Brief Description of Business
Franchisor of environmental sampling companies
Type of Business Organization
X corporation
□ business trust □ limited partnership, to be formed Month Year
Actual or Estimated Date of Incorporation or Organization: 09 92 X Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: NV
CN for Canada: FN for other foreign jurisdiction)
GENERAL INSTRUCTIONS Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).
When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address afterthe date on which it is due, on the date it was mailed by United States registered or certified mail to that address.
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, NW, Washington, D.C. 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix næd not be filed with the SEC.
Filing Fee: There is no federal filing fee.
State:
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administratorin each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed. ATTENTION
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the
appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the
filing of a federal notice

2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years: Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general managing partner of partnership issuers. ☐ General and/or Check Box(es) that Apply: Promoter X Beneficial Owner X Executive Officer X Director Managing Partner Full Name (Last name first, if individual) Torres, Edward Business or Residence Address (Number and Street, City, State, Zip Code) 1111 East Tahquitz Canyon Way, Suite 110, Palm Springs, California 92262 □ General and/or Managing Partner Full Name (Last name first, if individual) Leone, Joseph T. Business or Residence Address (Number and Street, City, State, Zip Code) 1111 East Tahquitz Canyon Way, Suite 110, Palm Springs, California 92262 □ General and/or Check Box(es) that Apply: \Box Promoter \Box Beneficial Owner \underline{X} Executive Officer \underline{X} Director Managing Partner Full Name (Last name first, if individual) Watkins, Lyle Business or Residence Address (Number and Street, City, State, Zip Code) 1111 East Tahquitz Canyon Way, Suite 110, Palm Springs, California 92262 □ General and/or Check Box(es) that Apply: \square Promoter \square Beneficial Owner \square Executive Officer X Director Managing Partner Full Name (Last name first, if individual) Moyer, Leroy Business or Residence Address (Number and Street, City, State, Zip Code) 1111 East Tahquitz Canyon Way, Suite 110, Palm Springs, California 92262 Check Box(es) that Apply: \square Promoter \square Beneficial Owner \square Executive Officer \underline{X} Director □ General and/or Managing Partner Full Name (Last name first, if individual) Finigan, Francis Business or Residence Address (Number and Street, City, State, Zip Code) 1111 East Tahquitz Canyon Way, Suite 110, Palm Springs, California 92262 ☐ General and/or Managing Partner Full Name (Last name first, if individual) August, S. Robert Business or Residence Address (Number and Street, City, State, Zip Code) 1111 East Tahquitz Canyon Way, Suite 110, Palm Springs, California 92262 ☐ General and/or Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) □ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

A. BASIC IDENTIFICATION DATA

(Use blank sheet, or copy and use additional copies of this sheet as necessary.)

					B. INFO	RMATIC	ON ABOU	J T OFF	RING				
1 Has th	he issuer	sold or a	loes the i	ssuer inte	end to sel	l to non•a	ccredited	investors	in this of	fering?			Yes No
				Ansv	ver also ii	n Appendi	ix. Columi	n 2. if fili	ng under	ULOE.			
2. What	is the mi	nimum ii	nvestmen	t that wil	l be acce _l	pted from	any indivi	idual?				\$_	615,000
3. Does	the offer	ing perm	it joint ov	vnership	of a singl	le unit?	***********						Yes No <u>X</u> 🗆
4 5 .					•					-41 !	d:		
remut persor than f	neration f n or agen	or solicit t of a bro	ation of p ker or dea	urchasers der regist	s in conne ered with	ection with the SEC a	sales of s and/or wit	ecurities h a state c	in the offer r states, li	ering. If a	a person to me of the	any commissio o be listed is ar broker or deal rmation for tha	n associated er. If more
	N/A												
Business	or Resid	ence Ado	dress (Ni	ımber an	d Street, (City, State	, Zip Cod	e)					
Name of	Associat	ed Broke	er or Deal	ег									
									 				
						s to Solici	t Purchase	s					All States
[AL]		[AZ]	check ind [AR]	[CA]	[CO]	[CT]	[DE]	(DC)	[FL]	[GA]	[HI]	[ID]	An States
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full Nan	ne (Last i	name firs	t, if indiv	idual)		<u></u>							
Business	or Resid	lence Add	dress (Nu	ımber an	d Street,	City, State	, Zip Cod	e)					
Name of	Associa	ed Broke	er or Deal	ег									
						s to Selici	t Purchase	:s	•				
(Chec		tates" or [AZ]	check ind [AR]	lividual S [CA]	tates	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	 [ID]	All States
[IL]	[NI]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
			t, if indiv										
Business	or Resid	lence Ad	dress (Nu	ımber an	d Street,	City, State	e, Zip Cod	le)					
Name of	Associa	ted Broke	er or Deal	er	· ·-								·
Ctotas :=	M/high C	Parcon 1:	atad bas 6	Caliaitad	or Intend	e to Calia	t Purchase		<u>.</u>				
			sted has S check ind			5 to 2011C1			.,		******		All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL] [MT]	[IN] [NE]	[IA] [NV]	(KS) [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	

(use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF	F INVESTORS, EXPENSES AND USE OF PROCEI	EDS
 Enter the aggregate offering price of securities included in this sold. Enter "O" if answer is "none" or "zero." If the transaction box ☐ and indicate in the columns below the amounts of the already exchanged. 	on is an exchange offering, check this	
Type of Security	Aggregate Offering Price	Amount Already Sold
	\$_615,000*	\$ <u>615,000*</u>
	\$ <u>*</u>	\$*
X Common		·
	\$ <u>*</u>	s •
	\$ -0-	\$ -0-
•	\$ -0-	\$ -0-
	\$_615,000*	\$ 615,000*
Answer also in Appendix, Colu	* For the \$615,000 of original principal amount of Notes Company issued to the investor (i) 750,000 Shares of the Co- warrant to purchase 275,000 shares of the Company's comm \$0.01 per share exercisable for a period of five years.	mpany's common stock an
Enter the number of accredited and non-accredited investors offering and the aggregatedollar amounts of their purchases. I the number of persons who have purchased securities and purchases on the total lines. Enter "0" if answer is "none" or	For offerings under Rule 504, indicate the aggregate dollar amount of their "zero"	
	Number of Investors A	Aggregate Dollar mount of Purchases
Accredited Investors	1	\$ 615,000
Non-accredited Investors	0	\$0-
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Colu	ımn 4, if filing under ULOE.	
If this filing is for an offering under Rule 504 or 505, enter the sold by the issuer, to date, in offerings of the types indicated first sale of securities in this offering. Classify securities by	fin the twelve (12) months prior to the	Dollar Amount
Type of Offering	Security	Sold
Rule 505		\$0-
Regulation A		\$ -0-
Rule 504	0-	\$ -0-
Total	0-	\$0
a. Furnish a statement of all expenses in connection with securities in this offering. Exclude amounts relating solely to The information may be given as subject to future contingent not known, furnish an estimate and check the box to the left	o organization expenses of the issuer. ties. If the amount of an expenditure is	
Transfer Agent's Fees		\$ -0-
Printing and Engraving Costs		\$ -0-
	<u>X</u>	\$ 5,000
•		\$ -0-
· ·		\$ -0-
· ·)	\$ -0-
	<u>X</u>	\$ 30,000
	<u>X</u>	\$ 35,000
* VMMI ,		

Total

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS. b. Enter the difference between the aggregate offering price given in response to Part C - Question I and total expenses furnished in response to Part C - Question 4.a. This difference 5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Payments to Officers Payments To Directors & **Affiliates** Others Salaries and fees **\$_-0-\$**_-0-Purchase of real estate.... Purchase, rental or leasing and installation of machinery and equipment..... \$ -0-Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets of securities of another X \$ 250,000 Repayment of indebtedness.... \$ -0-X \$_330,000 Working capital Other (specify):_ X \$ 580,000 Column Totals Total Payments Listed (column totals added). X \$_580,000 D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b) (2) of Rule 502 Issuer (Print or Type) June 26, 2007 **Environmental Service** Professionals, Inc. Name of Signer (Print or Type) Title of Signer (Print or Type)

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

Chief Executive Officer

Edward Torres

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۱.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisi	ions	s of
	such rule?		
		0	

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Environmental Service Professionals, Inc.	Dend pmg	June 26, 2007
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Edward Torres	Chief Executive Officer	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2		3	4				5 Disqualifi	cation
	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of inve amount purc (Part C-Item	hased in State			under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item I	
State	Yes	No	12% Promissory Notes, Common Stock, and Warrants	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK				•		-			
AZ									
AR									
CA						<u> </u>			
СО									
СТ									
DE									
DC									
FL									
GA									
НІ									
ID									
IL									
IN									
IA									
KS									
KY									
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MD									
МА							<u></u>		
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1	Intend to to non-acc investors (Part B-It	credited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of inve amount purc (Part C-Item	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item I				
State	Yes	No	12% Promissory Notes, Common Stock, and Warrants	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
NE					-		-		
NV									
NH									
NJ									
NM									
NY		Х		1	\$615,000	0	0		Х
NC									
ND									
ОН					_				
ок									
OR									
PA					<u></u>	_	ļ	_	<u> </u>
RI				,					ļ
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