Kidron Lisa Form 3 November 10, 2004 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Add Person <u>*</u> Kidron Lisa	-	orting	2. Date of Event Requiring Statement (Month/Day/Year)	01 100 der 1 (dit	e and Ticker of ECHNOLO		•••	A]	
	(First)	(Middle)	11/10/2004	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)		
980 GREG ST	(Street)	1		Director X Officer (give title below	all applicable) 	Owner r ow)	Filing(Check _X_ Form file Person	or Joint/Group Applicable Line) d by One Reporting d by More than One	
(City)	(State)	(Zip)	Table I - 1	Non-Derivat	ive Securit	ies Be	1 0		
1.Title of Security (Instr. 4)	7		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Na Owne (Instr	•	t Beneficial	
Reminder: Report owned directly or	-	ate line for ea	ch class of securities benefic	cially S	EC 1473 (7-02	2)			
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1. Title of Derivat Security (Instr. 4)	ive	2. Date Ex Expiration (Month/Day/Ye	Date Secu	itle and Amoun arities Underlyin vative Security			5. Ownership Form of	6. Nature of Indirect Beneficial Ownership	

(Instr. 4)

Title

Date Exercisable Expiration

Date

Price of

Security

Amount or

Number of

Shares

Derivative

Derivative

Security:

Direct (D)

or Indirect

(Instr. 5)

(I)

(Instr. 5)

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

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Stock Option (Right to Buy)	11/11/2006(1)	11/11/2014	Common Stock	6,000	\$ 15		D	Â
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Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	rector 10% Owner Officer		Other		
Kidron Lisa 980 GREG STREET SPARKS, NV 89431	Â	Â	Chief Financial Officer	Â		
Signatures						
/s/ Connie Stechman as attorney-in-fact		11/10/2004				

**Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 5(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Vesting schedule: 25% 11/11/06; 25% 11/11/07; 50% 11/11/08

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Remarks:

Connie Stechman is signing on behalf of Ms. Kidron pursuant to a power of attorney dated Nover

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.