2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003
Secretary of State

DOCUMENT# F09495

Entity Name: MACHO PRODUCTS, INC.

Current Principal Place of Business:

10045-102ND TERRACE
SEBASTIAN, FL 32958

New Principal Place of Business:

Current Mailing Address:

10045-102ND TERRACE
SEBASTIAN, FL 32958

New Mailing Address:

FEI Number: 59-2069844 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PARKER, CLIVE
10045 102ND TERRACE
SEBASTIAN, FL 32958 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	VDS	(X) Delete
Name:	ABLEMAN, MICHAEL R.	
Address:	11155 ROSELAND ROAD	
City-St-Zip:	SEBASTIAN, FL	
Title:	T/V	(X) Delete
Name:	PARKER, CLIVE	
Address:	898 PATTERSON AVENUE	
City-St-Zip:	SEBASTIAN, FL 32958	
Title:	DCP	( ) Delete
Name:	SHADAB, AMIR K.	
Address:	P.O. BOX 3697 N/A	
City-St-Zip:	VERO BEACH, FL 32963	
Title:	D	(X) Delete
Name:	CARIOTI, BRUNO	
Address:	4238 EMBASSY PARK DRIVE, NW	
City-St-Zip:	WASHINGTON, DC 20016	
Title:	D	(X) Delete
Name:	SORANNO, MARIA	
Address:	9101 SHORE RD	
City-St-Zip:	BROOKLYN, NY	
Title:	D	(X) Delete
Name:	PENNEY, WILLIAM J	
Address:	635 36TH AVENUE	
City-St-Zip:	VERO BEACH, FL 32968	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	CP	(X) Change ( ) Addition
Name:	SHADAB, AMIR K	
Address:	P.O. BOX 3697 N/A	
City-St-Zip:	VERO BEACH, FL 32963	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AMIR K SHADAB C 04/14/2003

Electronic Signature of Signing Officer or Director — Date