


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

APPROVED
AND
FILED

102

DOCUMENT # L 28247	
1. Entity Name ORGANIZATION GAMMA, INC.	

03 MAY -7 AM 6:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA


DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 20880 West Dixie Hwy Suite, Apt. #, etc. Suite 107 City & State N. M. BEACH FL Zip 33180 Country USA	3. Mailing Address 20880 W Dixie Hwy Suite, Apt. #, etc. 107 City & State N. Miami Beach FL Zip 33180 Country USA
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2002-2003 UBR

DO NOT WRITE IN THIS SPACE	4. FEI Number 59-298270		Applied For <input type="checkbox"/> Not Applicable
	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
	7. Name and Address of Current Registered Agent		
	Name MIGUEL GARBER Street Address (P.O. Box Number is Not Acceptable) 20880 WEST DIXIE HWY Suite 207 City NMB FL Zip Code 33180		

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **MIGUEL GARBER** **4/21/03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST MIGUEL GARBER 16300 NE 19th AVE NVE NMB FL 33162	TITLE NAME STREET ADDRESS CITY-ST-ZIP	000018303710 05/06/03--01096--004 **300.00
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IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:  **MIGUEL GARBER** **4/21/03** **305-9453009**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CRZE034B (12/02)

2052

CG Accounting Corporation

4101 Ravenswood Road, Suite 111, Fort Lauderdale, FL 33020 (954) 327-4617 Fax (954) 327-4618

April 28, 2003

Division of Corporations
PO Box 6327
Tallahassee, FL 32314

**Re: Organizacion Gamma Inc.
#L28247
UBR - 2002, 2003**

Dear State of Florida Representative,

We are the accountants for the above named taxpayer, and are writing this letter at the request of and with the approval of the president. This corporation never received their UBR in the mail for 2002 and never realized that it wasn't received. We sent an e-mail (copy enclosed) to advise us how to proceed.

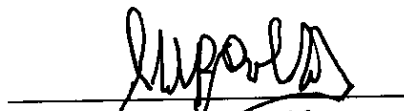
We are submitting the application together with the \$300 fee (\$150 for each year). We appreciate the abatement of the late fee. Please reactivate this dissolved company. Please see below for the signature of the president of the corporation.

If any additional information is needed, please contact us.

Very truly yours,


David Goldis

DTG/cb


Miguel Garber - President