

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

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>DOCUMENT #</b> L53483
<b>1. Entity Name</b>
GAMMA VISION, INC.

**DO NOT WRITE IN THIS SPACE**

**REINSTATEMENT 03**

<b>2. Principal Place of Business</b> 20725 NORTHEAST 16TH AVENUE Suite, Apt. #, etc.	<b>3. Mailing Address</b> 20725 NORTHEAST 16TH AVENUE Suite, Apt. #, etc.
#A-33 City & State MIAMI FL	#A-33 City & State MIAMI, FLORIDA 33179
Zip 33179	Country

**DO NOT WRITE IN THIS SPACE**

<b>4. FEI Number</b> 65-0181896	<b>Applied For</b> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

<b>Name</b> SHAI DINARI
<b>Street Address (P.O. Box Number is Not Acceptable)</b> 20725 NORTHEAST 16TH AVENUE, #A-33
<b>City</b> MIAMI
<b>FL</b> <b>Zip Code</b> 33179

**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**  **SHAI DINARI** **DATE** 12/30/03

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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** ☐ **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>P/S/T/D</b> SHAI DINARI 20725 NORTHEAST 16TH AVE, #A-33 MIAMI, FLORIDA 33179
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	
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**11.**

<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	700026605317 01/09/04--01044--011 **150.00
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<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	

**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:**  **SHAI DINARI, PRESIDENT**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12/30/03

LAW OFFICES  
**Singer & Associates**

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**Bernard A. Singer, Esq.**  
Board Certified Tax Lawyer

**Barry S. Schinder, Esq.**  
Of Counsel

**FORT LAUDERDALE:**  
3107 Stirling Road  
Suite 105  
Fort Lauderdale, Florida 33312

**REPLY TO:**  
FORT LAUDERDALE OFFICE

**TELEPHONES:**

**BOCA RATON:**  
5100 Town Center Circle  
Suite 430  
Boca Raton, Florida 33486

Fort Lauderdale: (954) 985-8600  
Boca Raton: (561) 347-0577  
Miami: (305) 892-8512  
Telecopier: (954) 985-8477

E-mail: [BernieSinger@lawyer.com](mailto:BernieSinger@lawyer.com)  
[BarrySchinder@lawyer.com](mailto:BarrySchinder@lawyer.com)

December 30, 2003

Division of Corporations  
Registration Section  
409 East Gaines Street  
Tallahassee, Florida 32399

Re: Gamma Vision, Inc.

Dear Sir/Madam:

Enclosed is the 2003 Uniform Business Report for Gamma Vision, Inc. along with my check in the amount of \$150.00 in payment of the annual fee.

My client never received any notice or the form for the 2003 Uniform Business Report. It would be greatly appreciated if you would waive any penalties in connection with this filing. My client always files timely reports to my knowledge and this inadvertent non-receipt of the report form is the reason for the lateness.

Thank you in advance for your courtesies in this matter.

Very truly yours,



Bernard A. Singer, Esquire  
BAS/bly  
Enclosures  
cc: Mr. Shai Dinari (without enclosures)

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