

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000039148

FILED  
Mar 06, 2004  
Secretary of State

Entity Name: EQUITY ONE (GAMMA) INC.

**Current Principal Place of Business:**

1696 NE MIAMI GARDENS DR  
NORTH MIAMI BEACH, FL 33179 US

**New Principal Place of Business:**

**Current Mailing Address:**

1696 NE MIAMI GARDENS DR  
NORTH MIAMI BEACH, FL 33179 US

**New Mailing Address:**

FEI Number: 65-0411409      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: PSD ( ) Delete  
Name: KATZMAN, CHAIM  
Address: 1696 NE MIAMI GARDENS DR  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: VPD ( ) Delete  
Name: VALERO, DORON  
Address: 1696 NE MIAMI GARDENS DR  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSD (X) Change ( ) Addition  
Name: KATZMAN, CHAIM  
Address: 1696 NE MIAMI GARDENS DR  
City-St-Zip: NORTH MIAMI BEACH, FL 33179 US

Title: VPD (X) Change ( ) Addition  
Name: VALERO, DORON  
Address: 1696 NE MIAMI GARDENS DR  
City-St-Zip: NORTH MIAMI BEACH, FL 33179 US

Title: VPT ( ) Change (X) Addition  
Name: SIPZNER, HOWARD  
Address: 1696 N.E. MIAMI GARDENS DRIVE  
City-St-Zip: N. MIAMI BEACH, FL 33179 US

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: DORON VALERO

VP

03/06/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date