

**2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
May 11, 2005  
Secretary of State**

DOCUMENT# P98000056250

Entity Name: GABBAY, INC.

**Current Principal Place of Business:**3105 N.W. 79TH ST.  
#E 22-23  
MIAMI, FL 33147**New Principal Place of Business:**3015 N.W. 79TH ST.  
#E 22-23  
MIAMI, FL 33147**Current Mailing Address:**2290 N.E 203 TER  
MIAMI, FL 33180**New Mailing Address:**

FEI Number: 65-0844342

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**GABBAY, MORIS  
3303 NE 171 ST  
N.M.BCH, FL 33160 US**Name and Address of New Registered Agent:**GABAY, SASON  
2290 NE 203 TER  
MIAMI, FL 33180 US

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: SASON GABAY

05/11/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: PD ( ) Delete  
Name: GABBAY, MORIS  
Address: 3303 NE 171 ST  
City-St-Zip: N.M.BCH, FL 33160Title: V.PD ( ) Delete  
Name: GABAY, SASON  
Address: 3015 NW 79 ST #E 22-23  
City-St-Zip: MIAMI, FL 33147Title: OFFI ( ) Delete  
Name: GABBAY, VICTOR  
Address: 3015 NW 79 ST  
City-St-Zip: MIAMI, FL 33147Title: OFFI (X) Delete  
Name: GABBAY, SHIMON  
Address: 3015 NW 79 ST  
City-St-Zip: MIAMI, FL 33147**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD (X) Change ( ) Addition  
Name: GABAY, SASON  
Address: 2290 NE 203 TER  
City-St-Zip: MIAMI, FL 33180Title: V.PD (X) Change ( ) Addition  
Name: GABBAY, VICTOR  
Address: 3015 NW 79 ST #E 22-23  
City-St-Zip: MIAMI, FL 33147Title: OFFI (X) Change ( ) Addition  
Name: GABBAY, SHIMON  
Address: 3015 NW 79 ST  
City-St-Zip: MIAMI, FL 33147Title: ( ) 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: SASON GABAY

PD

05/11/2005

Electronic Signature of Signing Officer or Director

Date