

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000090242

FILED  
Mar 13, 2004  
Secretary of State

Entity Name: GAMMA MACHINERY INC.

## Current Principal Place of Business:

5070 NORTH OCEAN DRIVE  
SUITE 22D  
SINGER ISLAND, FL 33404

## New Principal Place of Business:

## Current Mailing Address:

219 CLARKE AVE  
PALM BEACH, FL 33480

## New Mailing Address:

FEI Number: 65-1003154

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARELLEK, STEVEN  
700 S FEDERAL HWY  
SUITE 200  
BOCA RATON, FL 33432

## 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: P ( ) Delete  
Name: VARGA, JOSEPH  
Address: 219 CLARKE AVE  
City-St-Zip: PALM BEACH, FL 33480

Title: V ( ) Delete  
Name: DRABIK, AGNES  
Address: 219 CLARKE AVE  
City-St-Zip: PALM BEACH, FL 33480

Title: D ( ) Delete  
Name: VARGA-PAPP, ANDRE  
Address: 6130 MOUNTAINGATE DRIVE  
City-St-Zip: NIAGARA FALLS, ON L2J-4H8 CA

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: AGNES DRABIK

VP,

03/13/2004

Electronic Signature of Signing Officer or Director

Date