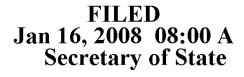
2008 FOR PROFIT CORPORATION

ANNUAL REPORT **DOCUMENT #481541** 1. Entity Name W. A. K., INC., OF FLAGLER BEACH Principal Place of Business Mailing Address 240 OCEAN PALM DRIVE FLAGLER BEACH, FL 32136





240 OCEAN PALM DRIVE FLAGLER BEACH, FL 32136 01062008 CR2E034 (11/05) No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1625397 Not Applicable \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent KARBOWSKY III, WALTER DO NOT WRITE 240 OCEAN PALM DRIVE FLAGLER BEACH, FL 32136 IN THIS SPACE 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 agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME KARBOWSKY, WALTER III STREET ADDRESS PO BOX 1388 CITY-ST-ZIP FLAGLER BEACH, FL 32136 TITLE U00000785758 01/17/08-80014-003 150.00 NAME KARBOWSKI, JADWIGA STREET ADDRESS 240 OCEAN PALM DRIVE CITY-ST-ZIP FLAGLER BEACH, FL 32136 PSDT TITLE KARBOWSKY, JADWIGA NAME STREET ADDRESS 240 OCEAN PALM DR. DO NOT WRITE CITY-ST-ZIP FLAGLER BEACH, FL 32136 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12.x.l.hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

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E OF SIGNING OFFICER OR DIRECTOR

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