

NONPROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

99 OCT 21 PM 1:43

DOCUMENT # 745830  
1. Corporation Name  
VAKA, INC.

Principal Place of Business  
30 SOUTH C ST.  
LAKE WORTH FL 33460

Mailing Address  
30 SOUTH C ST.  
LAKE WORTH FL 33460



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
1. <del>121 NORTH B ST</del> Suite, Apt. #, etc.	2a. <del>121 NORTH B ST</del> Suite, Apt. #, etc.	02/06/1979
2. APT 2 City & State	27. APT 2 City & State	4. FEI Number 65-0022567
3. LAKE WORTH, FL Zip	28. LAKE WORTH, FL Zip	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
4. 33460	29. 33460	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
RISSANEN, KAUKO J. 30 SOUTH C ST. LAKE WORTH, FL 33460	81. Name WARREN WESSON 82. Street Address (P.O. Box Number is Not Acceptable) 121 NORTH B ST #2 83. City LAKE WORTH FL 84. Zip Code 33460

11. Pursuant to the provisions of Sections 617.0502 and 617.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Warren Wesson SEC-TRES 7/6/99 DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input checked="" type="checkbox"/> DELETE	11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		12 NAME	
STREET ADDRESS		13 STREET ADDRESS	
CITY-ST-ZIP		14 CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> DELETE	21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> DELETE	31 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: WARREN WESSON SEC-TRES (561) 7/6/99 582-2032 DATE

CR2E037 (5/99)