

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000013419

Entity Name: AKA USA, INC.

FILED
Apr 26, 2004
Secretary of State

Current Principal Place of Business:

805 LUCERNE AVENUE
LAKE WORTH, FL 33460

New Principal Place of Business:

Current Mailing Address:

805 LUCERNE AVENUE
LAKE WORTH, FL 33460

New Mailing Address:

FEI Number: 59-3765845 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINCANNON, LAURA I
8 SOUTH J STREET
LAKE WORTH, FL 33460 US

Name and Address of New Registered Agent:

FINCANNON, LAURA L
303 N LAKESIDE DR
LAKE WORTH, FL 33460 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: LAURA L. FINCANNON

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RANDLES, NANCY
Address: 303 N LAKESIDE DR
City-St-Zip: LAKE WORTH, FL 33460

Title: D () Delete
Name: FINCANNON, LAURA
Address: 303 N LAKESIDE DR
City-St-Zip: LAKE WORTH, FL 33460

Title: D (X) Delete
Name: FALCK, MARTTI
Address: 111 WATERVIEW DR
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D (X) Delete
Name: TIMONEN, WAYNE
Address: PO BOX 361
City-St-Zip: CROTON, NY 105200361

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: LAURA L. FINCANNON

D

04/26/2004

Electronic Signature of Signing Officer or Director

Date