2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000104448

Entity Name: VAGA MANAGEMENT INC.

FILED Jun 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

626 S.W. MCHOLE AVE 11125 PARK BLVD. PORT SAINT LUCIE, FL 34953 104-317

SEMINOLE, FL 33772

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Current Mailing Address: New Mailing Address:

626 S.W. MCHOLE AVE 11125 PARK BLVD. PORT SAINT LUCIE, FL 34953 104-317

SEMINOLE, FL 33772

FEI Number: 65-0668314 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LUCZKOWIEC, ARTHUR
626 SW MCHOLE AVE.
PORT SAINT LUCIE, FL 34953 US
LUCZKOWIEC, ARTHUR
11125 PARK BLVD.
104-317

SEMINOLE, FL 33772 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: ARTHUR LUCZKOWIEC 06/23/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 LUCZKOWIEC, ARTHUR
 Name:
 LUCZKOWIEC, ARTHUR

 Address:
 1825 FLOWER DR
 Address:
 11125 PARK BLVD, STE 104-317

City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: SEMINOLE, FL 33772

Title: S () Delete Title: VP (X) Change () Addition

 Name:
 PYRKOWSKA, ELZBIETA
 Name:
 PYRKOWSKA, ELZBIETA

 Address:
 626 S.W. MCHOLE AVE
 Address:
 11125 PARK BLVD, STE 104-317

 City-St-Zip:
 PORT SAINT LUCIE, FL 34953
 City-St-Zip:
 SEMINOLE, FL 33772

Ony-of-zip. Toki Gaint Eddie, i.e. 34933

Title: T () Delete Title: D (X) Change () Addition Name: GADOMSKI, EDYTA Name: LUCZKOWIEC, EWA

Address: 18877 LOXAHATCHEE RIVER RD Address: 11125 PARK BLVD, STE 104-317

City-St-Zip: JUPITER, FL 33458 City-St-Zip: SEMINOLE, FL 33772

Title: VP (X) Delete Title: () Change () Addition

 Name:
 LUCZKOWIEC, EWA
 Name:

 Address:
 1825 FLOWER DR
 Address:

 City-St-Zip:
 PALM BEACH GARDENS, FL 33410
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ARTHUR LUCZKOWIEC P 06/23/2009