2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 494765

2015 SW 82ND AVE

DAVIE, FL 33324

Address: City-St-Zip: VIKING IMPORT HOUSE INC.

FILED Jan 06, 2006 Secretary of State

| Entity Na | me: VIKING IN | MPORT HOUSE, INC | Ο. | | | |
|---|--|---------------------------|-----------------|---|--|--|
| Current Principal Place of Business: | | | | New Principal Place of Business: | | |
| | EDERAL HWY JDERDALE, FL | | | | | |
| Current Mailing Address: | | | | New Mailing Address: | | |
| | EDERAL HWY JDERDALE, FL | | | | | |
| FEI Number: 59-1693061 FEI Number Applied For (| | | For () | El Number Not Applicable (|) Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | | Name and Address of New Registered Agent: | | |
| FT. LAUD | CEAN DR #17L ERDALE, FL 3 | 3316 US | nt for the pur | nose of changing its regis | tered office or registered agent, or both, | |
| | e of Florida. | subiliits tilis statellie | incror the purp | lose of changing its regis | tered office of registered agent, or bottl, | |
| SIGNATUI | RE: | | | | | |
| Electronic Signature of Registered Agent | | | | | Date | |
| Election Ca | mpaign Financing | Trust Fund Contributi | ion (). | | | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHA | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | OWEN, PATSÝ 2100 S. OCEAN | | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VPD () SCHULKERS, C 6944 NW 5TH A PLANTATION, F | VE. | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: | STD () REICHARDT, BI | Delete ETTY | | Title: Name: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: PAT OWEN PRES 01/06/2006