

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 494765

FILED  
Apr 11, 2008  
Secretary of State

Entity Name: VIKING IMPORT HOUSE, INC.

**Current Principal Place of Business:**

1516 S. FEDERAL HWY  
FORT LAUDERDALE, FL 33316

**New Principal Place of Business:**

**Current Mailing Address:**

1516 S. FEDERAL HWY  
FORT LAUDERDALE, FL 33316

**New Mailing Address:**

FEI Number: 59-1693061

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OWEN, PATSY P.  
2100 S. OCEAN DR #17L  
FT. LAUDERDALE, FL 33316 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: OWEN, PATSY P  
Address: 2100 S. OCEAN DR #17L  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: VPD ( ) Delete  
Name: SCHULKERS, CATHRYN  
Address: 6944 NW 5TH AVE  
City-St-Zip: PLANTATION, FL 33317

Title: STD ( ) Delete  
Name: REICHARDT, BETTY  
Address: 2015 SW 82ND AVE  
City-St-Zip: DAVIE, FL 33324

**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:

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: CATHRYN SCHULKERS

VPD

04/11/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date