

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G99915

Entity Name: VIKING KABINETS, INC.

FILED  
Jan 28, 2009  
Secretary of State

## Current Principal Place of Business:

C/P ROBERT E. SCHUR  
10445 SW 186TH LANE  
MIAMI, FL 33157

## New Principal Place of Business:

## Current Mailing Address:

C/P ROBERT E. SCHUR  
10445 SW 186TH LANE  
MIAMI, FL 33157

## New Mailing Address:

FEI Number: 59-2414697

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHUR, ROBERT E.  
501 BRICKELL KEY DRIVE  
300  
MIAMI, FL 33131 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: PT ( ) Delete  
Name: FULFORD, MICHAEL R.,  
Address: 10445 SW 186TH LANE  
City-St-Zip: MIAMI, FL

Title: T ( ) Delete  
Name: KEENAN, KEVIN  
Address: 10455 SW 186 LANE  
City-St-Zip: MIAMI, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition  
Name: FULFORD, MICHAEL  
Address: 10445 SW 186TH LANE  
City-St-Zip: MIAMI, FL

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: KEVIN KEENAN

T

01/28/2009

Electronic Signature of Signing Officer or Director

Date