

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000009244

FILED
Sep 08, 2005
Secretary of State

Entity Name: VIKING SERVICES GROUP, LLC

Current Principal Place of Business:

4690 LIPSCOMB ST.
6-F
PALM BAY, FL 32905

New Principal Place of Business:

Current Mailing Address:

PO BOX 60508
PALM BAY, FL 32906

New Mailing Address:

FEI Number: 59-3724164 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SOREN H. SALBOL
4320 SWANNA DR.
MELBOURNE, FL 32901 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: SALBOL, SOREN H
Address: 4320 SWANNA DR.
City-St-Zip: MELBOURNE, FL 32901

Title: VP () Delete
Name: SALBOL, BENTE
Address: 4320 SWANNA DR.
City-St-Zip: MELBOURNE, FL 32901

ADDITIONS/CHANGES:

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 for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: H SALBOL

P

09/08/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date