


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 19, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000010566	
1. Entity Name VIKING CONSULTING SERVICES, LLC	

Principal Place of Business 5660 COLLINS AVENUE SUITE 9E MIAMI BEACH, FL 33140 US	Mailing Address 5660 COLLINS AVENUE SUITE 9E MIAMI BEACH, FL 33140 US
---	---

2. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	
---	--

6. Name and Address of Current Registered Agent MADSEN, ERIC 5660 COLLINS AVENUE SUITE 9E MIAMI BEACH, FL 33140	
---	--

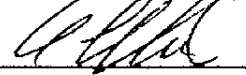
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MADSEN, ERIC 5660 COLLINS AVENUE, SUITE 9-E MIAMI BEACH, FL 33140
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

11. I hereby certify that the information supplied with this filing does not qualify 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 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:  **March 12, 2004** (305) 561-0359
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #



02112004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 16-1618412	Applied For Not Applicable
------------------------------------	-------------------------------

5. Certificate of Status Desired ☒ **\$5.00 Additional Fee Required**

U00000092672
03/19/04-80017-024 55.00