

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000003134

FILED
Mar 20, 2007
Secretary of State

Entity Name: VIKING CULINARY ARTS CENTERS, LLC

Current Principal Place of Business:

SILVER SANDS FACTORY
10746 EMERALD COAST PARKWAY #165
DESTIN, FL 32550

New Principal Place of Business:

Current Mailing Address:

VIKING CULINARY ARTS CENTER
1052 HIGHLAND COLONY PLWY, #125
RIDGELAND, MS 39157

New Mailing Address:

FEI Number: 64-0930105

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: SHERMAN, JOE
Address: 1052 HIGHLAND COLONY PARKWAY SUITE 125
City-St-Zip: RIDGELAND, MS 39157

Title: EV () Delete
Name: PAVY, BOB
Address: 1052 HIGHLAND COLONY PARKWAY SUITE 125
City-St-Zip: RIDGELAND, MS 39157

Title: V () Delete
Name: ANTOON, TONY
Address: 1052 HIGHLAND COLONY PARKWAY SUITE 125
City-St-Zip: RIDGELAND, MS 39157

ADDITIONS/CHANGES:

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 for the exemption stated in Chapter 119, 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: TONY ANTOON

V

03/20/2007

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