2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000124740

Entity Name: SERVIKING INC

FILED Jun 01, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1539 TANGELO CIRCLE 2139 FAIRMONT CT KISSIMMEE, FL 34746 2139 FAIRMONT CT ORLANDO, FL 32837

Current Mailing Address: New Mailing Address:

1539 TANGELO CIRCLE 2139 FAIRMONT CT KISSIMMEE, FL 34746 2139 FAIRMONT CT ORLANDO, FL 32837

FEI Number: 20-5653197 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

URDANETA ROCA, ISABEL M
1539 TANGELO CIRCLE
KISSIMMEE, FL 34746 US

URDANETA ROCA, ISABEL M
2139 FAIRMONT CT
ORLANDO, FL 32837 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: ISABEL URDANETA 06/01/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:P() DeleteTitle:P(X) Change () AdditionName:URDANETA ROCA, ISABEL MName:URDANETA ROCA, ISABEL MAddress:1539 TANGELO CIRCLEAddress:2139 FAIRMONT CTCity-St-Zip:KISSIMMEE, FL 34746City-St-Zip:ORLANDO, FL 32837

Title: VP () Delete Title: () Change () Addition

 Name:
 MENDEZ, MARCO A
 Name:

 Address:
 4543 SHANEWOOD CT
 Address:

 City-St-Zip:
 ORLANDO, FL 32837
 City-St-Zip:

Title: S () Delete Title: S (X) Change () Addition Name: VICUNA, OVIDIO Name: VICUNA, OVIDIO

 Name:
 VICUNA, OVIDIO
 Name:
 VICUNA, OVIDIO

 Address:
 1539 TANGELO CIRCLE
 Address:
 2139 FAIRMONT CT

 City-St-Zip:
 KISSIMMEE, FL 34746
 City-St-Zip:
 ORLANDO, FL 32837

Title: T () Delete Title: () Change () Addition

 Name:
 ALFONZO, CAROLINA
 Name:

 Address:
 4543 SHANEWOOD CT
 Address:

 City-St-Zip:
 ORLANDO, FL 32837
 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: CAROLINA ALFONZO T 06/01/2008