

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P27512

FILED
Apr 28, 2006
Secretary of State

Entity Name: VIKING OFFICE PRODUCTS, INC.

Current Principal Place of Business:

2925 W CORPORATE LAKES BLVD
WESTON, FL 33331 US

New Principal Place of Business:

Current Mailing Address:

950 W 190TH STREET
TORRANCE, CA 90502

New Mailing Address:

PO BOX 5029
BOCA RATON, FL 33451

FEI Number: 95-2082946

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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: SVPT () Delete
Name: AIKEN, JEFFREY A
Address: 2200 OLD GERMANTOWN ROAD
City-St-Zip: DELRAY BEACH, FL 33445

Title: PCEO () Delete
Name: ODLAND, STEVE
Address: 2200 OLD GERMANTOWN ROAD
City-St-Zip: DELRAY BEACH, FL 33445

Title: EVPD () Delete
Name: FANIN, DAVID
Address: 2200 OLD GERMANTOWN ROAD
City-St-Zip: DELRAY BEACH, FL 33445

Title: VPTD () Delete
Name: CLARKE, CAROLYN
Address: 2200 OLD GERMANTOWN ROAD
City-St-Zip: DELRAY BEACH, FL 33445

Title: SRVP () Delete
Name: CASHMAN, ANNE
Address: 950 WEST 190TH STREET
City-St-Zip: TORRANCE, CA 90502

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPT (X) Change () Addition
Name: GRADY, JIM
Address: 2200 OLD GERMANTOWN ROAD
City-St-Zip: DELRAY BEACH, FL 33445

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: JAMES GRADY

VP

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date