

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000039190

1. Corporation Name
VIKING MOTOR CARS, INC.

Principal Place of Business
807 NW 57TH STREET
FORT LAUDERDALE FL 33309

Mailing Address
807 NW 57TH STREET
FORT LAUDERDALE FL 33309

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90206 048 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/01/1997

4. FEI Number
65-0748720

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business
21 5491 NW 15 Street
Suite, Apt. #, etc. Bay 4
22 City & State
23 Margate, FL
Zip 33063 Country
24 33063 25

2a. Mailing Address
26 5491 NW 15 Street
Suite, Apt. #, etc. Bay 4
27 City & State
28 Margate FL
Zip 33063 Country
29 33063 30

9. Name and Address of Current Registered Agent

OLSEN, GEORGE P
807 NW 57TH STREET
FORT LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 5491 NW 15 Street, Bay 4
84 City
85 Margate FL
86 Zip Code
87 33063

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/29/99

12. OFFICERS AND DIRECTORS

TITLE
NAME
D
STREET ADDRESS
807 NW 57TH STREET
CITY-ST-ZIP
FORT LAUDERDALE FL 33309

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13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5491 NW 15 Street Bay 4
Margate FL 33063

14. 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 annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/99 954-984-4435

CR2E034 (11/98)