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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S81451

2333 PONCE DE LEON BLVD

CORAL GABLES FL 33134-5427

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

PH 1100

26

VIKING VENTURES, INC.

Principal Place of Business

2333 PONCE DE LEON BLVD

2. Principal Place of Business

CORAL GABLES FL 33134

Suite, Apt. #, etc.

PH 1100

Apr 29 1					
Secreta	ry c)[2	tate	•
L HERMOND HAN LUNCH HARM BY BELL CHIEF HAR F					
, Date Incorporated or Qualified	e Date	of I as	t Be	nort	 -
09/19/1991	3a. Date of Last Report 05/01/1996				
, FEI Number 65-0289359				lied For Applicat	nie
. Certificate of Status Desired	г	— — · · ·	5 A	ditional	
		- :		uired	
Election Campaign Financing Trust Fund Contribution		7		/lay Be Fees	
. This corporation has liability for in	tangible ta		rs.	199.032,	
Florida Statutes Name and Address of New Reg					
(P.O. Box Number is Not Acceptable	6)				
					7
· · · · · · · · · · · · · · · · · · ·	C1	8 5 Z	ip C	ode	
ion submits this statement for the pu	rpose of cl	hangir	g its	registeri	ed
board of directors. I hereby accep	t the appoir	ntment	as r	egistered	"
en reinstal (no)	DATE				
ADDITIONS/CHANGES TO OFFIC				N 12	Ø
] Chan	Qe	L. Aduit	0
					S S S S S S S S S S S S S S S S S S S
	Г	Chan	ne	Addit	
	L .		y ~	L. 1.00	
		Chan	ge	☐ Addi	tion

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 chroding or registered agant, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appoint agant. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, type-dier printed name of registered agent and life if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS THE WESTON, ANDREW R. SIREET ADDRESS CRY-ST-ZIP TITLE VD DELETE 1.1 TITLE VD DELETE 1.2 NAME 2.2 NAME COBB, SUE M. STREET ADDRESS CRY-ST-ZIP TITLE VD DELETE 2.1 TITLE VD DELETE 2.3 TITLE VD DELETE 2.3 STREET ADDRESS CRY-ST-ZIP TITLE VD DELETE 3.1 TITLE VB DELETE 3.1 TITLE VB DELETE 3.1 TITLE DELETE 3.	No ent 85 Zip C nanging its nament as r	199.032, Code s registered
9, Name and Address of Current Registered Agent 9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Age ANDREW R. WESTON 2333 PONCE DE LEON, PH 1100 1402 MAMI-CENTER CORAL GABLES FL 33134 81	ent Signal Sign	Code s registered registered S IN 12
9, Name and Address of Current Registered Agent ANDREW R. WESTON 2333 PONCE DE LEON, PH 1100 1402 MIAMI CENTER CORAL GABLES FL 33134 83 City FL 84 City FL 85 Street Address (P.O. Box Number is Not Acceptable) 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 che 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 appoint agent. Tam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of che 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 appoint agent tam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of che office or registered agent, and the applicable of the corporation's board of directors. I hereby accept the appoint agent tam familiar in the applicable of the corporation's board of directors. I hereby accept the applicable of the corporation's board of directors. I hereby accept the applicable of the applicable of the corporation's board of directors. I hereby accept the applicable of the applicable of the corporation's board of directors. I hereby accept the applicable of the applicable of the applicable of the corporation's board of directors. I hereby accept the applicable of the applicable of the applicable of the corporation's post of directors. I hereby accept the above named of the applicable of the corporation's post of directors. I hereby accept the applicable of the corporation's post of directors. I hereby accept the applicable of the corporation's post of directors. I hereby accept the applicable of the corporation's post of directors. I hereby accept the applicable of the corporation's post o	es Zip C nanging its itment as r	s registered registered S IN 12
ANDREW R. WESTON 2333 PONCE DE LEON, PH 1100 1402 MAMI CENTER CORAL GABLES FL 33134 84 City FL 85 City FL 86 City FL 87 City FL 88 City FL City FL 88 City FL City FL 88 City FL A	nanging its nanging its nanging its	s registered registered S IN 12
2333 PONCE DE LEON, PH 1100 1492 MAMI CENTER CORAL GABLES FL 33134 83 84 City FL 83 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 che of registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appoint agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, tyred or printed name of registered agent and life if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. TITLE WESTON, ANDREW R. 2333 PONCE DE LEON BLVD. CORAL GABLES FL 1.4 CITY-ST-ZIP TORE VD DELETE 1.1 TITLE VD DELETE 2.1 TITLE VD DELETE 2.2 NAME 2333 PONCE DE LEON BLVD. 23 STREET ADDRESS CITY-ST-ZIP CORAL GABLES FL DELETE 3.1 TITLE V DELETE 3.1 TITLE WESTON, ANDREW R 2333 PONCE DE LEON BLVD. CORAL GABLES FL DELETE 3.1 TITLE WESTON, ANDREW R 2000 POWER ST FOON BLVD. CORAL GABLES FL DELETE 3.1 TITLE DELETE 3.1 TITLE DELETE 3.2 NAME	nanging its nanging its nanging its	s registered registered S IN 12
HAVE MAMI- CENTER CORAL GABLES FL 33134 83 84 City FL 6 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 change was authorized by the corporation's board of directors. I hereby accept the appoint agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: Sysect or printed name of repotered agent and like if applicable (NOTE: Registered Agent signature required when relinately) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS INTILE VTS UESTON, ANDREW R. 2333 PONCE DE LEON BLVD. CORAL GABLES FL UDELETE 1.4 city-St-Zip UDELETE 2.1 ITILE VD UDELETE 2.2 NAME 2333 PONCE DE LEON BLVD. 23 STREET ADDRESS CITY-ST-Zip UND UDELETE 2.4 city-St-Zip UND UDELETE 3.1 TITLE V UDELETE 3.1 TITLE V UDELETE 3.1 TITLE V UDELETE 3.1 TITLE UND UDELETE 3.1 TITLE UND UDELETE 3.1 TITLE UND USENDANCE OFFICERS AND DIRECTORS 3.2 NAME USESTON, ANDREW R 2000 DELETE 3.1 TITLE UND USENDANCE OFFICERS AND DIRECTORS 3.2 NAME USENDANCE OFFICERS AND DIRECTORS 3.3 NAME USENCE ADDRESS COPAL GABLES FL UDELETE 3.1 TITLE UND UND UND UND UND UND UND UN	nanging its nanging its nanging its	s registered registered S IN 12
CORAL GABLES FL 33134 83 84 City FL 8 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 che officer 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 appoint agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. TITLE VTS WESTON, ANDREW R. SIRRET ADDRESS CITY-ST-2IP TITLE VD DELETE 1.1 STREET ADDRESS CORAL GABLES FL 1.4 CITY-ST-2IP TITLE VD DELETE 2.1 TITLE VD DELETE 2.2 NAME 2.333 PONCE DE LEON BLVD. COBB, SUE M. 2.333 PONCE DE LEON BLVD. COBB, SUE M. 2.333 PONCE DE LEON BLVD. CORAL GABLES FL DELETE 2.1 TITLE VD DELETE 3.1 TITLE VD DELETE 3.1 TITLE VD DELETE 3.1 TITLE VS DELETE 3.1 TITLE VS DELETE 3.1 TITLE NAME WESTON, ANDREW R CORAL GABLES FL DELETE 3.1 TITLE NAME WESTON, ANDREW R CORAL GABLES FL DELETE 3.1 TITLE DELETE DELETE 3.1 TITLE DELETE DELETE DELETE DELETE D	nanging its nanging its nanging its	s registered registered S IN 12
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 che 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 appoint agent. I am lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating). DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. THILE WESTON, ANDREW R. 2333 PONCE DE LEON BLVD. CORAL GABLES FL. 1.4 CITY-SI-ZIP TILLE VD. DELETE 21 TITLE COBB, SUE M. 2333 PONCE DE LEON BLVD. CORAL GABLES FL. 24 CITY-SI-ZIP DELETE 3.1 TITLE VIII. VIII	nanging its nanging its nanging its	s registered registered S IN 12
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 che 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 appoint agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature Items It	nanging its nanging its nanging its	s registered registered S IN 12
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 children of registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appoint 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 IMB II applicable. (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS NAME WESTON, ANDREW R. 2333 PONCE DE LEON BLVD. CORAL GABLES FL. 1.4 CITY-ST-ZIP DELETE 2.1 TITLE VD COBB, SUE M. 2333 PONCE DE LEON BLVD. COBB, SUE M. 2333 PONCE DE LEON BLVD. 23 STREET ADDRESS CITY-ST-ZIP CORAL GABLES FL. DELETE 2.1 TITLE VD CORAL GABLES FL. 2.2 NAME 2.3 STREET ADDRESS CITY-ST-ZIP UND DELETE 3.1 TITLE VS DELETE 3.1 TITLE NAME WESTON, ANDREW R 3.2 NAME 3.2 NAME	IRECTORS	S IN 12
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appoint 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 little if applicable. (NOTE: Registered Agent signature required when relinatoring) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS UNIT DELETE 1.1 Title DELETE 1.2 NAME 1.2 NAME 1.2 NAME 1.2 NAME 1.2 NAME 1.3 STREET ADDRESS CORAL GABLES FL DELETE 1.4 City - St - Zip DELETE	IRECTORS	S IN 12
SIGNATURE Signature. Typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11.1 TITLE NAME WESTON, ANDREW R. 1.2 NAME SIREET ADDRESS CORAL GABLES FL 1.4 CITY-ST-ZIP TITLE VD COBB, SUE M. 22 NAME 2333 PONCE DE LEON BLVD. COBB, SUE M. 2333 PONCE DE LEON BLVD. COBB, SUE M. 2333 PONCE DE LEON BLVD. CORAL GABLES FL DELETE 2 1 TITLE COBB, SUE M. 22 NAME 23 STREET ADDRESS CITY-ST-ZIP TITLE V DELETE 3.1 TITLE NAME WESTON, ANDREW R 32 NAME 32 NAME		
Signature. typed or printed name of registered agent and late if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 1.1 TiffLE NAME WESTON, ANDREW R. 2333 PONCE DE LEON BLVD. CORAL GABLES FL 1.4 City-St-Zip TITLE VD COBB, SUE M. 22 NAME 2333 PONCE DE LEON BLVD. COBB, SUE M. 2333 PONCE DE LEON BLVD. COBB, SUE M. 22 NAME 2333 PONCE DE LEON BLVD. CORAL GABLES FL 23 STREET ADDRESS CITY-ST-Zip TITLE V CORAL GABLES FL 23 STREET ADDRESS CITY-ST-Zip DELETE 3.1 TITLE V WESTON, ANDREW R 32 NAME 32 NAME		
12. OFFICERS AND DIRECTORS TITLE NAME SIRSET ADDRESS CITY-ST-ZIP TITLE VD COBB, SUE M. SIRSET ADDRESS CITY-ST-ZIP CORAL GABLES FL CITY-ST-ZIP CORAL GABLES FL DELETE STREET ADDRESS CITY-ST-ZIP DELETE 23 THILE COBB, SUE M. 2333 PONCE DE LEON BLVD. 23 STREET ADDRESS CITY-ST-ZIP CORAL GABLES FL DELETE 24 THILE COBB, SUE M. 23 STREET ADDRESS CITY-ST-ZIP CORAL GABLES FL DELETE 34 CITY-ST-ZIP UTLE V WESTON, ANDREW R 32 NAME		
THE VTS DELETE 1.1 TITLE 1.2 NAME NAME WESTON, ANDREW R. 1.2 NAME SIRSET ADDRESS CORAL GABLES FL 1.4 CITY-ST-ZIP TITLE VD DELETE 21 TITLE NAME COBB, SUE M. 23 STREET ADDRESS CORAL GABLES FL 2.2 NAME STREET ADDRESS CORAL GABLES FL 2.3 STREET ADDRESS CORY-ST-ZIP TITLE V DELETE 2.3 STREET ADDRESS CORY-ST-ZIP TITLE V DELETE 3.1 TITLE 3.2 NAME WESTON, ANDREW R 32 NAME	Ghange .	Addition
NAME NAME VESTON, ANDREW R. 2333 PONCE DE LEON BLVD. CORAL GABLES FL 1.2 NAME 1.3 STREET ADDRESS CORAL GABLES FL 1.4 City-st-zip 1.7 Title VD DELETE 23 TITLE NAME SCHEFT ADDRESS CORAL GABLES FL 23 STREET ADDRESS CORAL GABLES FL 22 NAME 23 STREET ADDRESS CORAL GABLES FL 24 CITY-ST-ZIP DELETE 3.1 TITLE VESTON, ANDREW R 32 NAME		
SIREET ADDRESS CORAL GABLES FL 1.3 STREET ADDRESS CORAL GABLES FL 1.4 CITY-ST-ZIP DELETE 2.3 TITLE VD COBB, SUE M. 2.3 STREET ADDRESS CITY-ST-ZIP 2.2 NAME 2.3 STREET ADDRESS CITY-ST-ZIP 2.3 STREET ADDRESS CITY-ST-ZIP DELETE 3.1 TITLE V WESTON, ANDREW R 3.2 NAME		
CORAL GABLES FL I.4 CITY-ST-ZIP DELETE 2.3 TITLE VD COBB, SUE M. 2.2 NAME 2.3 STREET ADDRESS CITY-ST-ZIP CORAL GABLES FL V DELETE 2.3 TITLE 2.4 CITY-ST-ZIP DELETE 3.1 TITLE V WESTON, ANDREW R 3.2 NAME		
TITLE VD DELETE 2.1 TITLE COBB, SUE M. 22 NAME 2333 PONCE DE LEON BLVD. 23 STREET ADDRESS CITY-ST-ZIP CORAL GABLES FL 2.4 CITY-ST-ZIP TITLE V WESTON, ANDREW R 3.2 NAME		
NAME STREET ADDRESS CITY-ST-ZIP CORAL GABLES FL V CORAL GABLES FL UESTON, ANDREW R CORAL BLOOM BLVD. DELETE 3.1 TITLE 3.2 NAME 3.2 NAME	Change	Addition
STREET ADDRESS COTAL GABLES FL COTAL GABLES FL COTAL GABLES FL DELETE 3.1 TITLE WESTON, ANDREW R COTAL GABLES FL ANDREW R COTAL GABLES FL COTAL GABLE		
CRAL GABLES FL 2.4 CITY-ST-ZIP DELETE 3.1 TITLE WESTON, ANDREW R 2.2 CITY-ST-ZIP 3.1 TITLE 3.2 NAME		
TITLE V DELETE 3.1 TITLE 3.2 NAME 3.2 NAME		
NAME WESTON, ANDREW R	Change	Additio
AND DONOE OF LEON BLVD		
STREET ADDRESS 2333 PUNCE DE LEUN BLVD \$3.3 STREET ADDRESS		
CITY-ST-ZIP CORAL GABLES FL 34. CITY-ST-ZIP		
TOLE DELETE 4.1 TITLE	Change	Addition
NAME 4.2 NAME		
STREET ADDRESS 4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
	Change	Additio
NAME 52 NAME		•
STREET ADDRESS 5.3 STREET ADDRESS		
CITY-ST-ZIP 5.4 CITY-ST-ZIP		
TITLE DELETE 6.1 TITLE	Change	Additio
NAME 6.2 NAME		
STREET ADDRESS 63 STREET ADDRESS		
CHY-SI-ZIP		
14. I do heretry 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 of information and cated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if		the

Ment with an address. ANDREW K. WES TON

SIGNATURE:

20544/1700