

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S81451

**FILED**  
**Apr 04, 2012**  
**Secretary of State**

**Entity Name:** VIKING VENTURES, INC.

**Current Principal Place of Business:**

121 ALHAMBRA PLAZA, STE. 1500  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 14-4200  
CORAL GABLES, FL 331144200

**New Mailing Address:**

**FEI Number:** 65-0289359

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PERDOMO, MERCEDES  
355 ALHAMBRA CIRCLE, SUITE 1500  
CORAL GABLES, FL 33134 US

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

PERDOMO, MERCEDES  
121 ALHAMBRA PLAZA, STE. 1500  
CORAL GABLES, FL 33134 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:

Electronic Signature of Registered Agent

04/04/2012

Date

**OFFICERS AND DIRECTORS:**

Title: DCP  
Name: COBB, CHARLES E JR  
Address: 121 ALHAMBRA PLAZA, STE. 1500  
City-St-Zip: CORAL GABLES, FL 33134

Title: VDST  
Name: COBB, SUE M.  
Address: 121 ALHAMBRA PLAZA, STE. 1500  
City-St-Zip: CORAL GABLES, FL 33134

I hereby 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 all other like empowered.

SIGNATURE: MERCEDES PERDOMO

RA

04/04/2012

Electronic Signature of Signing Officer or Director

Date