## 2005 FOR PROFIT CORPORATION

## Mar 17, 2005 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # F04000007065 03-17-2005 90018 035 \*\*\*150.00 1. Entity Name ROCHE MOLECULAR SYSTEMS, INC. Principal Place of Business Mailing Address 4300 HACIENDA DRIVE A2-181 TAX DEPT. 3431 HILLVIEW AVE PLEASANTON, CA 94588 PALO ALTO, CA 94304-1397 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02242005 Cha-P CR2E034 (10/03) City & State City & State 4 FEI Number Applied For 22-3140457 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE DS ☐ Delete TITLE ☐ Change Addition KENTZ, FREDERICK C III NAME NAME STREET ADDRESS 4300 HACIENDA DRIVE STREET ADDRESS CITY-ST-ZIP PLEASANTON, CA 94588 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition DREISMANN, HEINRICH NAME DREISMANN, HEINRICH NAME STREET ADDRESS 4300 HACIENDA DRIVE STREET ADDRESS CITY-ST-ZIP PLEASANTON, CA 94588 CITY-ST-7IP TITLE D Delete TITLE ☐ Change ☐ Addition NAME SALADIN, PETER NAME STREET ADDRESS 4300 HACIENDA DRIVE STREET ADDRESS PLEASANTON, CA 94588 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Channe ☐ Addition NAME MCDEDE, DAVID NAME STREET ADDRESS 4300 HACIENDA DRIVE STREET ADDRESS CITY-ST-ZIP PLEASANTON, CA 94588 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**FILED** 

650.855-1240

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Peter B. Saladin Vice President Finance

SIGNATURE: