# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

6/25/ 6/

**FILED**
**Jul 23, 2004 8:00 am**
**Secretary of State**
06-25-2004 90003 008 ***150.00

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MOORE CR2E034 (11/03)

DOCUMENT # P02000064587

1. Entity Name
RIGS INC

| Principal Place of Business | Mailing Address |
|---|---|
| 8241 S US HWY 1<br>PORT ST LUCIE FL 34952 | 8241 S US HWY 1<br>PORT ST LUCIE FL 34952 |

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| SAB | SAB |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |
| Zip / Country | Zip / Country |

4. FEI Number: 03-0459460 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

VERFAILLIE, ROLAND B
672 CLEVELAND AVE
STUART FL 34994

7. Name and Address of New Registered Agent

Name: Roland Verfaillie PhD
Street Address (P.O. Box Number is Not Acceptable): 8241 S. US #1
City: Port St. Lucie FL Zip Code: 34952

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: Roland Verfaillie PhD 6/17/04
(Registered Agent's typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS $150.00**
**After May 1, 2004 Fee will be $550.00**
**Make Check Payable to Florida Department of State**

This form was sent to an obsolete address. Recall sent!

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>VERFAILLIE, ROLAND B<br>672 CLEVELAND AVE<br>STUART FL 34994 | ☐ Delete | Roland Verfaillie PhD<br>8241 So US #1 President<br>Port St. Lucie, FL 34952 | ☑ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | Gordon Bohl, Vice President<br>8241 S. US #1<br>Port St Lucie, FL 34952 | ☐ Change ☑ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | | ☐ Change ☐ Addition |
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| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | | ☐ Change ☐ Addition |

12. 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 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.

**SIGNATURE:** Roland Verfaillie PhD 6/16/04 800-393-8359
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #