

P97000057316

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

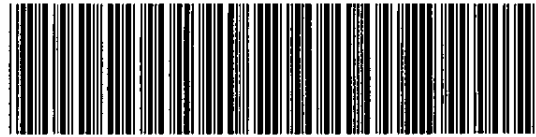
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts APR 07 2008



ALL FLORIDA FIRM INC

813 Deltona Blvd., Ste A
Deltona, FL 32725
Phone 386-575-1180

3/25/2008

Our Reference # 1217071

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: RIGA, INC

Please file the attached 2008 Annual report. You will find a check for the filing fee attached.

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: **RIGA, INC.**
2. The principal office address: **1457 N.US HWY 1, SUITE # C-23 ORMOND BEACH FL 32174**
3. The mailing address (if different): **P.O. BOX 730717 ORMOND BEACH FL 32173**
4. Date of incorporation/qualification: **6/30/1997** Document number: **P97000057316**

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

**HAMID R TOUTOUNCHIAN
1457 N.US HWY 1, SUITE # C-23
ORMOND BEACH FL 32174**

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

**ALL FLORIDA FIRM INC
813 DELTONA BLVD STE A (Box #1217071)
DELTONA, FL 32725**

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

Hamid R. Toutounchian
(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity.
I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*


(Signature of Registered Agent)

March 20, 2008
(Date)

If signing on behalf of an entity:

Danny Santiago
(Typed or Printed Name)

***** FILING FEE: \$35.00 *****

**MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 1217071**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA