2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000064482

Entity Name: THE RIGGING ROOM, INC.

FILED Apr 29, 2002 8:00 AM Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:		
	DIVE LANE HILLS, FL 335	540			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	DIVE LANE HILLS, FL 335	540			
FEI Number	r: 65-0941310	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:		
4439 SKY	THOMAS DIVE LANE HILLS, FL 335	540			
The above	e named entity	submits this statement for the	nurnoso of changing its registers		
in the Stat	e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
in the Stat SIGNATU		adding this statement for the	purpose or changing its registere	d office or registered agent, or both,	
	RE:	onic Signature of Registered Ag		d office or registered agent, or both, Date	
SIGNATU	RE: Electro		ent		
SIGNATU This corpor Election Ca	RE: Electro	onic Signature of Registered Ag to satisfy its Intangible Tax filing red ng Trust Fund Contribution ().	ent quirement and elects to do so (X).	Date	
SIGNATU This corpor Election Ca	Electronal	onic Signature of Registered Ag to satisfy its Intangible Tax filing red ng Trust Fund Contribution (). CTORS:) Delete DMAS J RPORT DRIVE	ent quirement and elects to do so (X).	Date	
SIGNATU This corpor Election Ca OFFICER Title: Name: Address:	RE: Electron is eligible impaign Financial CS (PARKER, THO 400 WEST ALSEBASTIAN, I	onic Signature of Registered Ag to satisfy its Intangible Tax filing rec ng Trust Fund Contribution (). CTORS:) Delete DMAS J RPORT DRIVE FL 32958) Delete	ent quirement and elects to do so (X). ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: THOMAS PARKER DCS 04/29/2002