

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000091856

Entity Name: RYD HEALTH CARE INC

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5470 EAST BUSCH BLVD  
UNIT 173  
TAMPA, FL 33617

**New Principal Place of Business:**

**Current Mailing Address:**

5470 EAST BUSCH BLVD UNIT 173  
TAMPA, FL 33617

**New Mailing Address:**

FEI Number: 27-3856611

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RANDALL, RYAN T  
5470 EAST BUSH BLVD  
UNIT 173  
TAMPA, FL 33617 US

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

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: RANDALL, RYAN T  
Address: 5470 EAST BUSCH BLVD UNIT 173  
City-St-Zip: TAMPA, FL 33617

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: RYAN RANDALL

P

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date