## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000086424

Entity Name: RIPEAR, INC.

FILED Mar 18, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
2993 EAST WESTON, I							
Current Mailing Address:				New Mailing Address:			
PO BOX 26 FORT LAUI	6406 DERDALE, F	L 33326					
FEI Number:	94-3406464	FEI Number Applied For ( )	FEI Num	nber Not Appli	cable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
PEREZ-ARCINIEGAS, RICARDO 2993 EAST MERION WESTON, FL 33332 US				VARGAS, CARLOS A 2993 EAST MERION WESTON, FL 33332 US			
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.							
SIGNATUR	E: CARLOS	S A VARGAS				03/18/2005	
	Electro	nic Signature of Registered Agen	t			Date	_
Election Cam	paign Financin	g Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	,			Title: Name: Address: City-St-Zip:	D (X) VARGAS, CARL 2993 EAST MEI WESTON, FL 3	RION	
Title: Name: Address: City-St-Zip:	,			Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	*			Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MR ( VARGAS, CAR 2993 EAST ME WESTON, FL	ERION		Title: Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	CORP ( FUNDEFA, P.O BOX 2664 WESTON, FL			Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MR ( MONCADA, FF 2993 EAST ME WESTON, FL	ERION		Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	

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: CARLOS A VARGAS D 03/18/2005