2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000118771

Entity Name: RAMP DOCTORS, INC

FILED Feb 18, 2011 Secretary of State

| Current Principal Place of Business: | | New Principal Place of Business: | |
|--|----------------------------------|---|--|
| 5780 BUR OAKS LN NAPLES, FL 34119 | | | |
| Current Mailing Address: | | New Mailing Address: | |
| 5780 BUR OAKS LN NAPLES, FL 34119 | | | |
| FEI Number: 01-0556548 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and Address of Current Registered Agent: | | Name and Address of New Registered Agent: | |
| JOHNSON, BEN 5780 BUR OAKS LN NAPLES, FL 34119 | JS | | |
| The above named entity in the State of Florida. | submits this statement for the p | ourpose of changing its registered | d office or registered agent, or both, |
| SIGNATURE: | | | |
| SIGNATURE. | nic Signature of Registered Age | | Date |

OFFICERS AND DIRECTORS:

Title:

Name: JOHNSON, BEN 5780 BUR OAKS LN Address: City-St-Zip: NAPLES, FL 34119

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: BEN JOHNSON DP 02/18/2011