

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000035406

**Entity Name:** KIPRIIP ENTERPRISES, INC.

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

393 GILSTON CT  
HEATHROW, FL 32746

**New Principal Place of Business:**

**Current Mailing Address:**

393 GILSTON CT  
HEATHROW, FL 32746

**New Mailing Address:**

**FEI Number:** 01-0787704

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RIPPER, ELDER N III  
393 GILSTON CT  
HEATHROW, FL 32746 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: PD  
Name: RIPPER, ELDER N III  
Address: 393 GILSTON CT  
City-St-Zip: HEATHROW, FL 32746

Title: VSTD  
Name: RIPPER, JERIE A RIPPER  
Address: 393 GILSTON CT  
City-St-Zip: HEATHROW, FL 32746

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: ELDER N. RIPPER III

PD

04/27/2011

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

\_\_\_\_\_  
Date