

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000107129

Entity Name: GET RIPPED, INC.

FILED  
Jan 24, 2007  
Secretary of State

## Current Principal Place of Business:

2790 SE FED HWY  
STUART, FL 34994

## New Principal Place of Business:

## Current Mailing Address:

2703 SW HORSESHOE TRAIL  
PALM CITY, FL 34990

## New Mailing Address:

2790 SE FED HWY  
STUART, FL 34994

FEI Number: 20-3641695

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FENEX, MATTHEW G  
2703 SW HORSESHOE TRAIL  
PALM CITY, FL 34990 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/ST ( ) Delete  
Name: FENEX, MATTHEW G  
Address: 2703 SW HORSESHOE TRAIL  
City-St-Zip: PALM CITY, FL 34990

Title: V ( ) Delete  
Name: MARINELLI, DAVID M  
Address: 2740 SW MARTIN DOWNS BLVD  
City-St-Zip: PALM CITY, FL 34990

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: FENEX, MATTHEW G  
Address: 2703 SW HORSESHOE TRAIL  
City-St-Zip: PALM CITY, FL 34990

Title: VP (X) Change ( ) Addition  
Name: LEIGH, DAMON  
Address: 1220 SW COVERED BRIDGE RD  
City-St-Zip: PALM CITY, FL 34990

Title: SCTY ( ) Change (X) Addition  
Name: MARINELLI, DAVID M  
Address: 2740 SW MARTIN DOWNS BLVD  
City-St-Zip: PALM CITY, FL 34990

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MATTHEW G. FENEX

PRES

01/24/2007

Electronic Signature of Signing Officer or Director

Date