2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P04000107129

Entity Name: GET RIPPED, INC.

Current Principal Place of Business:

2790 SE FED HWY
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

2790 SE FED HWY
STUART, FL 34994

New Mailing Address:

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:

FENEX, MATTHEW G
6191 SW 39TH ST
PALM CITY, FL 34990 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.

SIGNATURE: 04/30/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: FENEX, MATTHEW G
Address: 6191 SW 39TH ST
City-St-Zip: PALM CITY, FL 34990

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 04/30/2009
Electronic Signature of Signing Officer or Director — Date