

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000166715

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** CHIRONEX ENTERPRISES, INC

**Current Principal Place of Business:**

6265 W. SAMPLE RD.  
CORAL SPRINGS, FL 33066

**New Principal Place of Business:**

**Current Mailing Address:**

6265 W. SAMPLE RD.  
CORAL SPRINGS, FL 33066

**New Mailing Address:**

**FEI Number:** 41-2193772

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CAJAR, ALFREDO  
4378 CARAMBOLA CIRCLE NORTH  
COCONUT CREEK, FL 33066 US

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

CAJAR, ALFREDO  
8141 SW 8TH ST  
N. LAUDERDALE, FL 33068 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: ALFREDO CAJAR,DC

04/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPST  
Name: CAJAR, ALFREDO  
Address: 6265 WEST SAMPLE RD  
City-St-Zip: CORAL SPRINGS, FL 33067

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: ALFREDO CAJAR

DPST

04/29/2011

Electronic Signature of Signing Officer or Director

Date