2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000012131

Entity Name: CHIEF MED, INC.

FILED Apr 25, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
114 NORT	RE M. BURT HEAST FIRST I, FL 32693	STREET			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
POST OFF	RE M. BURT FICE BOX 308 I, FL 32693				
FEI Number:	59-3321005	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
114 NORT	EODORE M HEAST FIRST I, FL 32693	STREET US			
The above in the State		submits this statement for the բ	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	nic Signature of Registered Age	ent	Date	
Election Can	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PDST (SANDERS, TAI 1113 NW 23RI CHIEFLAND, F)	Title: Name: Address: Citv-St-Zip:	()Change ()Addition	

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: TAMMY K. SANDERS PDST 04/25/2007