2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2005
Secretary of State

DOCUMENT# P95000072283

Entity Name: CHIROFIEL, INC.

Current Principal Place of Business:

2269 SOUTH UNIVERSITY DRIVE
SUITE 139
DAVIE, FL 33324

New Principal Place of Business:

Current Mailing Address:

2269 SOUTH UNIVERSITY DRIVE
SUITE 139
DAVIE, FL 33324

New Mailing Address:

FEI Number: 65-0627644 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEIF, PAMELA
4730 SW 62 WAY
#104
DAVIE, FL 33314 US

Name and Address of New Registered Agent:

LEIF, PAMELA
2418 TORTUGAS LN
FT LAUDERDALE, FL 33312 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: PAMELA S LEIF 02/23/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: LEIF, PAMELA
Address: 4730 SW 62 WAY, #104
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: LEIF, PAMELA
Address: 2418 TORTUGAS LN
City-St-Zip: FT LAUDERDALE, 33 33314

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PAMELA S LEIF DR 02/23/2005
Electronic Signature of Signing Officer or Director Date