

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000010165

FILED  
Jan 06, 2011  
Secretary of State

**Entity Name:** QUANTACHROME CORPORATION

**Current Principal Place of Business:**

1900 CORPORATE DR.  
BOYNTON BEACH, FL 33426

**New Principal Place of Business:**

**Current Mailing Address:**

1900 CORPORATE DR.  
BOYNTON BEACH, FL 33426

**New Mailing Address:**

**FEI Number:** 11-2161663

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOWELL, F. SCOTT  
1900 CORPORATE DRIVE  
BOYNTON BEACH, FL 33426 US

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

SPECTOR, LAUREN  
1900 CORPORATE DRIVE  
BOYNTON BEACH, FL 33426 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: LAUREN SPECTOR

01/06/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: C  
Name: LOWELL, SEYMOUR  
Address: 1944 FLAGLER ESTATES DR  
City-St-Zip: WEST PALM BEACH, FL 33411

Title: P  
Name: LOWELL, F. SCOTT  
Address: 203 GROVE WAY  
City-St-Zip: DELRAY BEACH, FL 33444

Title: T  
Name: SPECTOR, LAUREN  
Address: 7810 S FLAGLER DR  
City-St-Zip: WEST PALM BEACH, FL 33405

Title: S  
Name: HERLING, HERBERT  
Address: 16076 VIA MONTERERDE  
City-St-Zip: DELRAY BEACH, FL 33446

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: LAUREN SPECTOR

T

01/06/2011

Electronic Signature of Signing Officer or Director

Date