

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000010165

Entity Name: QUANTACHROME CORPORATION**Current Principal Place of Business:**1900 CORPORATE DR.
BOYNTON BEACH, FL 33426**Current Mailing Address:**1900 CORPORATE DR.
BOYNTON BEACH, FL 33426**FEI Number: 11-2161663****Certificate of Status Desired: Yes****Name and Address of Current 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	CHAIRMAN, DIRECTOR
Name	LOWELL, SEYMOUR
Address	373 SOUTH COUNTRY CLUB DRIVE
City-State-Zip:	ATLANTIS FL 33462

Title	PRESIDENT, DIRECTOR
Name	LOWELL, F. SCOTT
Address	1900 CORPORATE DRIVE
City-State-Zip:	BOYNTON BEACH FL 33426

Title	TREASURER, DIRECTOR
Name	SPECTOR, LAUREN
Address	7810 S FLAGLER DR
City-State-Zip:	WEST PALM BEACH FL 33405

Title	SECRETARY, DIRECTOR
Name	HERLING, HERBERT
Address	16076 VIA MONTERERDE
City-State-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**CFO****01/13/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date