

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000025051

**Entity Name:** QUANTUM BIO ENERGETIC SERVICES, L.L.C.

**Current Principal Place of Business:**

401 FOREST PARK CIRCLE  
LONGWOOD, FL 32779

**Current Mailing Address:**

401 FOREST PARK CIRCLE  
LONGWOOD, FL 32779

**FEI Number: 06-1650586**

**Certificate of Status Desired: No**

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

LEFKOWITZ, IVAN M  
430 NORTH MILLS AVENUE  
ORLANDO, FL 32803 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

**Authorized Person(s) Detail :**

Title MGR  
Name WILLIAMSON, SANDRA  
Address 401 FOREST PARK CR.  
City-State-Zip: LONGWOOD FL 32779

Title MGR  
Name WILLIAMSON, TODD  
Address 401 FOREST PARK CIRCLE  
City-State-Zip: LONGWOOD FL 32779

Title MGR  
Name WILLIAMSON, ANDREW  
Address 401 FOREST PARK CIRCLE  
City-State-Zip: LONGWOOD FL 32779

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE: SANDRA C. WILLIAMSON**

**MRG**

**05/05/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date