FILED 2008 LIMITED PARTNERSHIP ANNUAL REPORT May 02, 2008 08:00 AN Secretary of State **Due By May 1, 2008 DOCUMENT # A98000002661** QUANTUM BIOENGINEERING LTD. Principal Place of Business Mailing Address 201 N. UNIVERSITY DRIVE, SUITE 101 2 S. BISCAYNE BLVD., SUITE 3400 PLANTATION, FL 33324 MIAMI, FL 33131 02012008 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE 4. FEI Number 65-0879099 \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent GY CORPORATE SERVICES, INC. DO NOT WRITE 2 SOUTH BISCAYNE BLVD., SUITE 3400 MIAMI, FL 33131 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. U00000946383 FILE NOW!!! FEE IS \$500.00 3Ŏ/Ŏ8-8ĊŎ43-O22 50**0.**00 After May 1, 2008, Fee will be \$900.00 A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. GENERAL PARTNER INFORMATION P97000050235 DOCUMENT **#** QUANTUM BIOENGINEERING, INC. NAME STREET ADDRESS 2 SOUTH BISCAYNE BLVD., SUITE 3400 CITY-ST-ZIP MIAMI, FL 33131 DOCUMENT # NAME STREET ADDRESS

DO NOT WRITE IN THIS SPACE

CITY-ST-7IP 14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a General Partner of the limited partnership or the receiver or trustee employered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

CITY-ST-ZIP DOCUMENT #

STREET ADDRESS CITY-ST-7IP

DOCUMENT #

STREET ADDRESS CITY-ST-ZIP DOCUMENT **#** NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS

Applied For

Not Applicable