

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000044087

**FILED**  
**Apr 22, 2011**  
**Secretary of State**

**Entity Name:** AMETHYST QUANTUM REJUVENATION CENTER, L.L.C.

**Current Principal Place of Business:**

2645 SW 37 AVENUE  
SUITE 701  
MIAMI, FL 33135

**New Principal Place of Business:**

**Current Mailing Address:**

2645 SW 37 AVENUE  
MIAMI, FL 33135

**New Mailing Address:**

2645 SW 37 AVENUE  
701  
MIAMI, FL 33133

FEI Number: 20-2803792

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MORENO, MAYDELINE  
2645 SW 37 AVE  
SUITE 701  
MIAMI, FL 33135 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MORENO, MAYDELINE  
Address: 18634 SW 47TH CT.  
City-St-Zip: MIRAMAR, FL 33029

Title: MGR  
Name: MORENO, ADOLFO  
Address: 18634 SW 47 CT  
City-St-Zip: MIRAMAR, FL 33029

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: MAYDELINE MORENO

MM

04/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date