

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000076880

FILED
Mar 11, 2007
Secretary of State

Entity Name: QUANTUM HEALTH AND WELLNESS, LLC

Current Principal Place of Business:

297 CARMEL DRIVE
MELBOURNE, FL 32940 US

New Principal Place of Business:

4905 WILD GRAPE WAY
MELBOURNE, FL 32940 US

Current Mailing Address:

297 CARMEL DRIVE
MELBOURNE, FL 32940 US

New Mailing Address:

4905 WILD GRAPE WAY
MELBOURNE, FL 32940 US

FEI Number: 16-1768297 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FISICHELLA, KIMMARIE
4905 WILD GRAPE WAY
MELBOURNE, FL 32940 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: MGRM () Delete
Name: FISICHELLA, KIM MARIE
Address: 4905 WILD GRAPE WAY
City-St-Zip: MELBOURNE, FL 32940 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FISICHELLA, KIM MARIE
Address: 4905 WILD GRAPE WAY
City-St-Zip: MELBOURNE, FL 32940 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: KIIM MARIE FISICHELLA

MGR

03/11/2007

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