

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000097931

**FILED**  
**Feb 27, 2015**  
**Secretary of State**  
**CC6358337063**

**Entity Name:** APPLIED QUANTITATIVE SCIENCES,INC.

**Current Principal Place of Business:**

1901 NORTH OCEAN BOULEVARD  
FORT LAUDERDALE, FL 33305

**Current Mailing Address:**

1901 NORTH OCEAN BLVD  
FORT LAUDERDALE, FL 33305 US

**FEI Number: 35-2426995**

**Certificate of Status Desired: No**

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

BUSINESS FILINGS INCORPORATED  
515 E. PARK AVENUE  
SUITE 101  
TALLAHASSEE, FL 32301 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: MARK WILLIAMS**

**02/27/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name KUBICA, MICHAEL  
Address 1901 NORTH OCEAN BOULEVARD  
SUITE S-16A  
City-State-Zip: FORT LAUDERDALE FL 33305

Title PRESIDENT  
Name KUBICA, MICHAEL  
Address 1901 NORTH OCEAN BOULEVARD  
SUITE S-16A  
City-State-Zip: FORT LAUDERDALE FL 33305

Title VICE-PRESIDENT  
Name KUBICA, MICHAEL  
Address 1901 NORTH OCEAN BOULEVARD  
SUITE S-16A  
City-State-Zip: FORT LAUDERDALE FL 33305

Title SECRETARY  
Name KUBICA, MICHAEL  
Address 1901 NORTH OCEAN BOULEVARD  
SUITE S-16A  
City-State-Zip: FORT LAUDERDALE FL 33305

Title TREASURER  
Name KUBICA, MICHAEL  
Address 1901 NORTH OCEAN BOULEVARD  
SUITE S-16A  
City-State-Zip: FORT LAUDERDALE FL 33305

*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: MICHAEL KUBICA**

**PRESIDENT**

**02/27/2015**

Electronic Signature of Signing Officer/Director Detail

Date