## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 28, 2008 8:00 am Secretary of State

DOCUMENT # F05000001638  1. Entity Name MYND CORPORATION						04-28-2008 90329 033 ***150.00					
Principal Place of Business  10301 WILSON BLVD.  BLYTHEWOOD, SC 29016  Mailing Address  10301-WILSON E  BLYTHEWOOD, SC 29016					÷						
2. Principal P	face of Business - No P.O. Box #	3. Mailing Address 2100 East Grand Avenue									
Suite, Apt. #, etc.		Suite, Apt. #, etc.				04102008	Chg-P	CR2E	034 (12/06)		
City & State		City & State El Segundo, CA				4. FEI Numbe 63-1241				plied For t Applicable	
Zip	Country	Zip 90245	Countr US			5. Certificate of Status Desired					
Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD				Street Address (P.O. Box Number is Not Acceptable)							
PLANTATION, FL 33324											
				City				FI	Zip Code	e	
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											
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rematating)  DATE											
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees											
10.	OFFICERS AND D		11.	1		ADDITIONS/	CHANGES TO OFFI	CERS AN			
NAME	<del>VPF</del> KEANE, MICHAEL E	X Defete	TITL		VPF	11 C D	- D 1-		☐ Change	X Addition	
STREET ADDRESS	2100 BAST GRAND AVE					ald G. De	ebuck cand Avenu	•			
CITY-ST-ZIP	EL-SEGUNDO, CA 90245		CITY				CA 90245				
TITLE	EISK HAYWARD D	Defete	TITL		XPS:	TäämäDaal	rolmon		☐ Change	X Addition	
NAME Street address	2100 E. GRAND AVENUE-		NAM	ET ADDRESS	3170	) Fairvi	kelman ew Park Dr	ive			
CITY-ST-ZIP				-ST-ZIP	Fall	ls Churci	h, VA 220	42			
TITLE	VPAT	☐ Detete	TITL	:	24.7				☐ Change	Addition	
NAME	GILMORE, LOU ANNE		NAM	_			•				
STREET ADDRESS CITY-ST-ZIP	9500 ARBORETUM BLVD. AUSTIN, TX 787596399			ET ADDRESS -ST-ZIP							
TITLE	AS	☐ Delete	TITL						☐ Change	Addition	
NAME	JOHNSON, STEPHEN E	L_1 Delete	NAM						L_1 change	L] ADURIOR	
STREET ADDRESS	2100 E. GRAND AVENUE		STRE	ET ADDRESS							
CITY-ST-ZIP	EL SEGUNDO, CA 90245		CITY	-ST-ZIP							
TITLE	T IDVIN THOMAS D	☐ Delete	TITL	1					Change	Addition	
NAME Street address	IRVIN, THOMAS R   2100 E GRAND AVE		NAM Stri	EET ADDRESS							
CITY-ST-ZIP	EL SEGUNDO, CA 90245			-SI-ZIP						Ì	
TITLE	AT	☐ Delete	TITL	E					☐ Change	Addition	
NAME	Bryan Brady		NAM						-		
STREET ADDRESS CITY-ST-ZIP	2100 East Grand Ayer	iue		ET ADDRESS - ST- ZIP						<u> </u>	
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.											

SIGNATURE:

Bryan Brady
BIGINATURE AND TYPES OF PRINTED WANE OF SIGNING OFFICER OR DIRECTOR

04/17/08

310.615.0311

Dayime Phone #