above, or on an attachment with all other like empowered. SIGNATURE: GARY W BREND

Electronic Signature of Signing Officer/Director Detail

PO

Certificate of Status Desired: No

Electronic Signature of 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:

| Officer/Director Detail : | | | |
|---------------------------|----------------------|-----------------|----------------------|
| Title | PO | Title | 0 |
| Name | BREND, GARY W. | Name | BREND, DIANE L. |
| Address | 3336 WESTMORELAND DR | Address | 3336 WESTMORELAND DR |
| City-State-Zip: | TAMPA FL 33618 | City-State-Zip: | TAMPA FL 33618 |

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 637440

Entity Name: THE BREND CORPORATION

Current Principal Place of Business:

C/O GARY BREND 3336 WESTMORELAND DR TAMPA, FL 33618

Current Mailing Address:

C/O GARY BREND 3336 WESTMORELAND DR TAMPA, FL 33618 US

FEI Number: 59-2196833

Name and Address of Current Registered Agent:

BREND, GARY W 3336 WESTMORELAND DR TAMPA, FL 33618 US

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

FILED Apr 13, 2013 Secretary of State CC3982388809

04/13/2013

Date