

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001638

Entity Name: MYND CORPORATION**Current Principal Place of Business:**3170 FAIRVIEW PARK DR.
FALLS CHURCH, VA 22042**Current Mailing Address:**3170 FAIRVIEW PARK DR.
FALLS CHURCH, VA 22042 US**FEI Number:** 65-1241836**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title DIRECTOR
Name DECKELMAN, WILLIAM L. JR.
Address 3170 FAIRVIEW PARK DR.
City-State-Zip: FALLS CHURCH VA 22042

Title DIRECTOR/TREASURER
Name DIAO, CHARLES
Address 3170 FAIRVIEW PARK DR.
City-State-Zip: FALLS CHURCH VA 22042

Title SECRETARY
Name LALL, INDIRA
Address 3170 FAIRVIEW PARK DR.
City-State-Zip: FALLS CHURCH VA 22042

Title PRESIDENT
Name SMITH, JAMES
Address 3170 FAIRVIEW PARK DR.
City-State-Zip: FALLS CHURCH VA 22042

Title DIRECTOR
Name WILFONG, DIANE
Address 3170 FAIRVIEW PARK DR.
City-State-Zip: FALLS CHURCH VA 22042

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: CHARLES DIAO**TREASURER****04/15/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date