

<b>SCC eFile</b>	<b>2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	212526548				
1.) CORPORATION NAME: <b>Wavetrend Technologies, Inc.</b>		DUE DATE: <b>9/30/2012</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>DEON RABE 4101 CHAIN BRIDGE RD STE 304 FAIRFAX, VA 22030</b>		SCC ID NO: <b>F1643396</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>FAIRFAX COUNTY</b>		5.) STOCK INFORMATION <table border="1" style="border-collapse: collapse;"> <tr> <td style="padding: 2px;">CLASS</td> <td style="padding: 2px;">AUTHORIZED</td> </tr> <tr> <td style="padding: 2px;">COMMON</td> <td style="padding: 2px;">100</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	100
CLASS	AUTHORIZED					
COMMON	100					
4.) STATE OR COUNTRY OF INCORPORATION: <b>DE</b>						
6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 4101 CHAIN BRIDGE RD STE 304  CITY/ST/ZIP: FAIRFAX, VA 22030						
7.) DIRECTORS AND PRINCIPAL OFFICERS:      All directors and principal officers must be listed. An individual may be designated as both a director and an officer.						
NAME:                    FRANCIS FIRMSTONE TITLE:                    DIRECTOR ADDRESS:                Gothic House 3 The Green CITY/ST/ZIP/CO:        Richmond, Surrey TW91PL, GB	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR				
NAME:                    ANDREW ALDERSON TITLE:                    DIRECTOR ADDRESS:                Gothic House 3 The Green CITY/ST/ZIP/CO:        Richmond, Surrey TW91PL, GB	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR				
NAME:                    DEON RABE TITLE:                    OFFICER ADDRESS:                4101 CHAINBRIDGE ROAD STE 304 CITY/ST/ZIP/CO:        FAIRFAX, VA 22030	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR				
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.						
<u>/s/ DEON RABE</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>DEON RABE, OFFICER</u> PRINTED NAME AND CORPORATE TITLE	<u>7/17/2012</u> DATE				
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.						