## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000061000

Entity Name: OTEROS TENIS CORP

FILED Apr 09, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1601 MERIDIAN AV #4 1601 MERIDIAN AVE #4 MIAMI, FL 33139 1601 MERIDIAN AVE #3 MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

1601 MERIDIAN AV #4 1601 MERIDIAN AVE #4 MIAMI, FL 33139 1601 MERIDIAN AVE #3 MIAMI BEACH, FL 33139

FEI Number: 20-2938772 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MAURO, OTERO OTERO, MARCELO
1601 MERIDIAN AV #4 1601 MERIDIAN AVE #4
MIAMI, FL 33139 US MIAMI BEACH, FL 33139 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: MARCELO OTERO 04/09/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

1601 MERIDIAN AV #4

MIAMI, FL 33139

## **OFFICERS AND DIRECTORS:**

City-St-Zip:

Name: Address:

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 ( ) Delete
 Title:
 PD
 (X) Change ( ) Addition

 Name:
 MAURO, OTERO
 Name:
 OTERO, MARCELO

 Address:
 1601 MERIDIAN AV #4
 Address:
 1601 MERIDIAN AVE #4

MIAMI, FL 33139

Address: 1601 Mexidian AV #4

City-St-Zip: MIAMI BEACH, FL 33139

Title: S ( ) Delete Title: SD (X) Change ( ) Addition Name: MARCELO, OTERO Name: OTERO, MARIA

 Name:
 MARCELO, OTERO
 Name:
 OTERO, MARIA

 Address:
 1601 MERIDIAN AV #4
 Address:
 1601 MERIDIAN AVE #4

 City-St-Zip:
 MIAMI, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33139

Title: V ( ) Delete Title: VPD (X) Change ( ) Addition

 Name:
 THAUREAUX, IBIA
 Name:
 THAUREAUX, IBIA

 Address:
 1601 MERIDIAN AV #4
 Address:
 1601 MERIDIAN AVE #4

 City-St-Zip:
 MIAMI, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33139

Title: D (X) Delete Title: ( ) Change ( ) Addition Name: MARIA, OTERO S Name:

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MARCELO OTERO PD 04/09/2007