2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000034179

Entity Name: ITERA INTERNATIONAL ENERGY CORPORATION

FILED Feb 25, 2008 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
9995 GATE PKWY N. STE 400 JACKSONVILLE, FL 32256 US						
Current Mailing Address:			New Maili	New Mailing Address:		
9995 GATE PKWY N. STE 400 JACKSONVILLE, FL 32256 US						
FEI Number: 59-3243999 FEI Number Applied For () FEI Num			Number Not Appl	nber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
FRENKEL, RAISSA M 9995 GATE PKWY N. STE 400 JACKSONVILLE, FL 32246 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 Election Campaign Financing Trust Fund Contribution ().						
Election Campaign Financing Trust Fund Continuation ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PCED () Dele MAKAROV, IGOR 9995 GATE PKWY S JACKSONVILLE, FL	STE 400	Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	VSD () Dele FOSTER, DENNIS A 9995 GATE PARKW JACKSONVILLE, FL	\ 'AY N #400	Title: Name: Address: City-St-Zip:	VPSD (X) (FOSTER, DENNI 9995 GATE PAR JACKSONVILLE,	KWAY N #400	
Title: Name: Address: City-St-Zip:	VPCD () Dele FRENKEL, RAISSA 9995 GATE PKWY S JACKSONVILLE, FL	M . STE 400	Title: Name: Address: City-St-Zip:	()(Change ()Addition	
Title: Name: Address: City-St-Zip:	VPTD () Dele SISSELMAN, STEVE 9995 GATE PKWY S JACKSONVILLE, FL	EN M STE 400	Title: Name: Address: City-St-Zip:	() (Change()Addition	
Title: Name: Address: City-St-Zip:	VPD () Dele FINKER, LAZAR S 9995 GATE PKWY S JACKSONVILLE, FL	STE 400	Title: Name: Address: City-St-Zip:	VPSD (X) OF FINKER, LAZAR 9995 GATE PKW JACKSONVILLE,	/Y STE 400	
Title: Name: Address: City-St-Zip:	CP () Dele KAVALIEROS, NICH 9995 GATE PAKWY JACKSONVILLE, FL	OLAS T SUITE 400	Title: Name: Address: City-St-Zip:	VPD (X) (CHATTIN, WILLIA 9995 GATE PAK JACKSONVILLE,	WY SUITE 400	
I hereby certify that the information supplied with this filing does not qualify 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						

SIGNATURE: DENNIS A. FOSTER VPSD 02/25/2008

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.