

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000008503

Entity Name: TERENA CORPORATION

FILED  
Apr 24, 2008  
Secretary of State

## Current Principal Place of Business:

14703 CORAL BERRY DR.  
TAMPA, FL 33626 US

## New Principal Place of Business:

## Current Mailing Address:

14703 CORAL BERRY DR.  
TAMPA, FL 33626 US

## New Mailing Address:

FEI Number: 59-3424441

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GOLDMAN, TERRILL  
14703 CORAL BERRY DR.  
TAMPA, FL 33626 US

## Name and Address of New 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GOLDMAN, TERRILL  
Address: 14703 CORAL BERRY DR.  
City-St-Zip: TAMPA, FL 33626

Title: D ( ) Delete  
Name: SAWYERS, RENA  
Address: 620 WILLOW RIDGE CRICLE  
City-St-Zip: PROSPER, TX 75078

Title: D ( ) Delete  
Name: WALTERS, JOEL  
Address: 584 CUTTER LN  
City-St-Zip: LONG BOAT KEY, FL 34228

Title: D ( ) Delete  
Name: DA COSTA, MICHAEL  
Address: 1609 HILLS OF RED #201  
City-St-Zip: LAS VEGAS, NV 89128

Title: D (X) Delete  
Name: KALLISH, MICHAEL  
Address: 818 S NEWPORT AVENUE  
City-St-Zip: TAMPA, FL 33606

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: GOLDMAN, TERRILL  
Address: 14703 CORAL BERRY DR.  
City-St-Zip: TAMPA, FL 33626 US

Title: D (X) Change ( ) Addition  
Name: WALTERS, JOEL  
Address: 584 CUTTER LN  
City-St-Zip: LONG BOAT KEY, FL 34228 US

Title: D (X) Change ( ) Addition  
Name: KALLISH, MICHAEL  
Address: 818 S NEWPORT AVENUE  
City-St-Zip: TAMPA, FL 33606 US

Title: D (X) Change ( ) Addition  
Name: DA COSTA, MICHAEL  
Address: 1609 HILLS OF RED #201  
City-St-Zip: LAS VEGAS, NV 89128 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: TERRILL GOLDMAN

PD

04/24/2008

Electronic Signature of Signing Officer or Director

Date