

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000008503

FILED
Apr 24, 2008
Secretary of State

Entity Name: TERENA CORPORATION

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