2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000004832

Name:

Address:

City-St-Zip:

Entity Name: OTERO ENGINEERING, INC.

FILED Feb 25, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 14802 N. DALE MABRY SUITE 200 TAMPA, FL 33618 **New Mailing Address: Current Mailing Address:** 14802 N. DALE MABRY SUITE 200 TAMPA, FL 33618 FEI Number: 65-0806517 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: OTERO, CHARLES A 18218 CLEAR LAKE DR. LUTZ, FL 33549 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition OTERO, CHARLES A Name: Name: 18218 CLEAR LAKE DR. Address: Address: City-St-Zip: LUTZ, FL 33549 City-St-Zip: Title: DS Title: () Delete () Change () Addition CALLISON, RICK Name: Name: 14001 SHADY SHORE DRIVE Address: Address: TAMPA, FL 33613 City-St-Zip: City-St-Zip: Title: Title: (X) Change () Addition () Delete DV KROMER, JOE KROMER, JOE Name: Name: 4209 WINDING WILLOW DRIVE 4209 WINDING WILLOW DRIVE Address: Address: City-St-Zip: TAMPA, FL 33618 City-St-Zip: TAMPA, FL 33618 Title: () Delete Title: DS () Change (X) Addition KROMER, PAMELA

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.

Name:

Address:

City-St-Zip:

4209 WINDING WILLOW DRIVE

TAMPA, FL 33618

SIGNATURE: CHARLES A OTERO DP 02/25/2008