

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002980

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: HERITAGE COMMERCIAL CORP.

## Current Principal Place of Business:

1380 NE MIAMI GARDENS DR  
SUITE 240  
NORTH MIAMI BEACH, FL 33179

## Current Mailing Address:

1835 NE MIAMI GARDENS DR  
144  
NORTH MIAMI BEACH, FL 33179

## New Principal Place of Business:

1835 N.E. MIAMI GARDENS DRIVE  
# 144  
NORTH MIAMI BEACH, FL 33179

## New Mailing Address:

1835 N.E. MIAMI GARDENS DRIVE  
# 144  
NORTH MIAMI BEACH, FL 33179

FEI Number: 76-0793466

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

AGUIRRE, JUAN  
1380 NE MIAMI GARDENS DR  
SUITE 240  
NORTH MIAMI BEACH, FL 33179 US

## Name and Address of New Registered Agent:

AGUIRRE, JUAN  
1835 N.E. MIAMI GARDENS DRIVE  
# 144  
NORTH MIAMI BEACH, FL 33179 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: JUAN AGUIRRE

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: AGUIRRE, JUAN  
Address: EL DORADO, GALERIA MIAMI #13  
City-St-Zip: PANAMA, REP OF PANAMA,

Title: DP ( ) Delete  
Name: MILTON ERASMO CHAMBO, NETT LEMOS  
Address: EL DORADO, GALERIA MIAMI #13  
City-St-Zip: PANAMA, REP OF PANAMA,

Title: DVPT ( ) Delete  
Name: RAUL ELIAS BERRIO CA, STILLO  
Address: EL DORADO, GALERIA MIAMI #13  
City-St-Zip: PANAMA, REP OF PANAMA,

Title: DS ( ) Delete  
Name: FELIPE BULGIN ORTEGA,  
Address: EL DORADO, GALERIA MIAMI #13  
City-St-Zip: PANAMA, REP OF PANAMA,

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JUAN AGUIRRE

D

04/30/2007

Electronic Signature of Signing Officer or Director

Date