

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000006136

Entity Name: HEROLD USA INC

FILED  
Aug 21, 2007  
Secretary of State

## Current Principal Place of Business:

969 NAUTICA DR  
WESTON, FL 33327

## New Principal Place of Business:

## Current Mailing Address:

318 INDIAN TRACE # 339  
WESTON, FL 33326

## New Mailing Address:

FEI Number: 56-2584354

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

## Name and Address of New Registered Agent:

AMKE REGISTERED AGENTS LLC  
ONE S.E. THIRD AVENUE  
SUITE 2250  
MIAMI, FL 33131 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: ARTURO J. ABALLI

08/21/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: NEVAREZ, ALEJANDRO  
Address: 318 INDIAN TRACE 3339  
City-St-Zip: WESTON, FL 33326

Title: D ( ) Delete  
Name: COGLITORE, SANDRO  
Address: AV C.J. AROSEMENA KM 3  
City-St-Zip: GUAYAQUIL ECUADOR,

Title: D ( ) Delete  
Name: VANONI, MARIA A  
Address: AV C.J. AROSEMENA KM 3  
City-St-Zip: GUAYAQUIL ECUADOR,

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: VANONI, SANDRO A  
Address: 318 INDIAN TRACE #339  
City-St-Zip: WESTON, FL 33326

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

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

Title: D ( ) Change (X) Addition  
Name: VANONI D., XAVIER  
Address: 318 INDIAN TRACE #339  
City-St-Zip: WESTON, FL 33326

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: SANDRO COGLITORE

D

08/21/2007

Electronic Signature of Signing Officer or Director

Date