

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000127153

Entity Name: HEJRUP, INC.

FILED
Apr 26, 2007
Secretary of State

Current Principal Place of Business:

301 ALBEE ROAD
NOKOMIS, FL 34276

New Principal Place of Business:

370 AUSTER RD.
VENICE, FL 34293

Current Mailing Address:

301 ALBEE ROAD
NOKOMIS, FL 34276

New Mailing Address:

370 AUSTER RD.
VENICE, FL 34293

FEI Number: 20-1581245

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRUSZKA, JOLANTA
2637 PROUD TRUTH LANE
SARASOTA, FL 34240 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: P () Delete
Name: LAKOMY, PREMYSL
Address: 301 ALBEE ROAD
City-St-Zip: NOKOMIS, FL 34276 US

Title: O () Delete
Name: JOHNSON, VLADIMIRA
Address: 1328 JAMAICA ROAD
City-St-Zip: VENICE, FL 34293

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LAKOMY, PREMYSL
Address: 370 AUSTER RD
City-St-Zip: VENICE, FL 34293 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LAKOMY PREMYSL

P

04/26/2007

Electronic Signature of Signing Officer or Director

Date