

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000152807

Entity Name: HEROGI GROUP, INC.

FILED
Jan 29, 2007
Secretary of State

Current Principal Place of Business:

1702 SOUTHEAST VILLAGE GREEN DRIVE
PORT SAINT LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

1702 SOUTHEAST VILLAGE GREEN DRIVE
PORT SAINT LUCIE, FL 34952

New Mailing Address:

FEI Number: 55-0912304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHARD, AMBROGI P
10702 VILLAGE GREEN DRIVE
PORT ST. LUCIE, FL 34952 US

Name and Address of New Registered Agent:

RICHARD, AMBROGI P
1702 VILLAGE GREEN DRIVE
PORT ST. LUCIE, FL 34952 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: _____

01/29/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HEROLD, VICTOR J
Address: 1702 SOUTHEAST VILLAGE GREEN DRIVE
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: SD () Delete
Name: AMBROGI, RICHARD P
Address: 1702 SOUTHEAST VILLAGE GREEN DRIVE
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: TD () Delete
Name: AMBROGI, LEO J
Address: 1702 SOUTHEAST VILLAGE GREEN DRIVE
City-St-Zip: PORT SAINT LUCIE, FL 34952

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:

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: RICHARD P. AMBROGI

SD

01/29/2007

Electronic Signature of Signing Officer or Director

Date