

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000091922

FILED  
Mar 11, 2009  
Secretary of State

Entity Name: HERFO INTERNATIONAL SALES & SERVICES INC

## Current Principal Place of Business:

2805 CARIBBEAN ISLE BLVD AP 611  
MELBOURNE, FL 32935

## New Principal Place of Business:

240 SE ST LUCIE BOULEVARD  
305  
STUART, FL 34996

## Current Mailing Address:

2805 CARIBBEAN ISLE BLVD AP 611  
MELBOURNE, FL 32935

## New Mailing Address:

240 SE ST LUCIE BOULEVARD  
305  
STUART, FL 34996

FEI Number: 20-0775036

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FONTALVO, ADRIANA  
2805 CARIBBEAN ISLE BLVD AP 611  
MELBOURNE, FL 32935 US

## Name and Address of New Registered Agent:

FONTALVO, ADRIANA  
240 SE ST LUCIE BOULEVARD  
305  
STUART, FL 34996 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:

03/11/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete  
Name: FONTALVO, ADRIANA C  
Address: 2805 CARIBBEAN ISLE BLVD AP 611  
City-St-Zip: MELBOURNE, FL 34935

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition  
Name: FONTALVO, ADRIANA C  
Address: 240 SE ST LUCIE BOULEVARD 305  
City-St-Zip: STUART, FL 34996

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: FONTALVO ADRIANA C

DPST

03/11/2009

Electronic Signature of Signing Officer or Director

Date