2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000117993

Entity Name: HEROESOFTHEPAST.JP INC.

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4162 BRIARCLIFF CIRCLE 10555 FENWAY PLACE

BOCA RATON, FL 33496 US BOCA RATON, FL 33498 US

Current Mailing Address: New Mailing Address:

4162 BRIARCLIFF CIRCLE 10555 FENWAY PLACE

BOCA RATON, FL 33496 US BOCA RATON, FL 33498 US

FEI Number: 26-1461035 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SCHUSTEK, DOUGLAS
4162 BRIARCLIFF CIRCLE
10555 FENWAY PLACE

BOCA RATON, FL 33496 US BOCA RATON, FL 33498 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: 04/24/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PRES
 () Delete
 Title:
 PRES
 (X) Change () Addition

 Name:
 SCHUSTEK, DOUGLAS
 Name:
 SCHUSTEK, DOUGLAS

Address: 4162 BRIARCLIFF CIRCLE Address: 10555 FENWAY PLACE
City-St-Zip: BOCA RATON, FL 33496 US City-St-Zip: BOCA RATON, FL 33498 US

Title: TRES () Delete Title: TRES (X) Change () Addition

 Name:
 SCHUSTEK, DOUGLAS
 Name:
 SCHUSTEK, DOUGLAS

 Address:
 4162 BRIARCLIFF CIRCLE
 Address:
 10555 FENWAY PLACE

 City-St-Zip:
 BOCA RATON, FL 33496 US
 City-St-Zip:
 BOCA RATON, FL 33498 US

Title: DIR () Delete Title: DIR (X) Change () Addition

Name:SCHUSTEK, DOUGLASName:SCHUSTEK, DOUGLASAddress:4162 BRIARCLIFF CIRCLEAddress:10555 FENWAYPLACECity-St-Zip:BOCA RATON, FL 33496 USCity-St-Zip:BOCA RATON, FL 33498 US

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: DOUGLAS SCHUSTEK PRES 04/24/2009