## Edgar Filing: NATIONAL FINANCIAL SERVICES CORP - Form 5/A

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

### NATIONAL FINANCIAL SERVICES CORP

Form 5/A August 05, 2011

# FORM 5

#### **OMB APPROVAL**

3235-0362

	his box if er subject		Expires:	January 31, 2005					
5 obliga may cor	or Form ANN tions ntinue.				HANGES IN BEN SECURITIES	NEFICIAL	Estimated average burden hours per response		
See Inst 1(b). Form 3 Reporte Form 4 Transac Reporte	Filed pu Holdings Section 17d d tions	(a) of the P	ublic U	Jtility Holdi	Securities Exchanging Company Act of 19	of 1935 or Secti			
	Address of Reporting INTERNATION AGS, INC.	AL	Symbol NATIO	Name and Tie ONAL FINA ICES CORF		5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
(Mc				nent for Issuer Day/Year) 2011	's Fiscal Year Ended	_X_ Director _X_ 10% Owner _X_ Officer (give title _X_ Other (specify below) below) 08/04/2011 9:15 AM chase.com / 08/04/2011			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year) 08/04/2011			9:39 AM chase.com  6. Individual or Joint/Group Reporting  (check applicable line)			
BEAUTIF	TUL HAIR, FLÂ	33155				Form Filed by _X_ Form Filed by Person	One Reporting F y More than One		
(City)	(State)	(Zip)	Tak	ole I - Non-De	rivative Securities Ac	quired, Disposed	of, or Beneficia	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Dany (Month/Day	Date, if	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

(Instr. 3 and 4)

or

Amount (D) Price

SEC 2270 (9-02)

### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exercisable and	7. Title and	8. Price of	9.
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration Date	Amount of	Derivative	of
Security	or Exercise		any	Code	of	(Month/Day/Year)	Underlying	Security	D

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(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr. 8)	Derivative Securities Acquired (A) or Disposed of (D)		Securitie (Instr. 3		(Instr. 5)	
				(Instr. 3, 4, and 5)					
				(A) (D)	Date Exercisable	Expiration Date	or N of	umber	

# **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
HERZOG INTERNATIONAL HOLDINGS, INC. 33 TERRACE SW 8371 AVENUE BEAUTIFUL HAIR, FL 33155	ÂX	ÂX	08/04/2011 9:15 AM chase.com	08/04/2011 9:39 AM chase.com			
GREEN CAPITAL GROUP, INC. 33 TERRACE SW 8371 AVENUE BEAUTIFUL HAIR, FL 33155	ÂX	ÂX	08/04/2011 9:15 AM chase.com	08/04/2011 9:15 AM chase.com			
Signatures							
http://mail.royalpalmcapital.net	08/05/2011						
**Signature of Reporting Person	Date						

# **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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### **Remarks:**

ACTUALYÂ IÂ HAVEÂ TOÂ THINKÂ AÂ BITÂ IÂ DOÂ NEEDÂ TOÂ MAKEÂ AÂ DEPOSITÂ ANDÂ DECLAREÂ EDDIEÂ DARIOÂ TOLEDOÂ ORÂ WHATÂ EVERÂ YOURÂ NAMEÂ ISÂ YOUÂ WHOMÂ AREÂ INÂ THISÂ PICT MAYÂ IÂ HAVEÂ AÂ RECEIPT

THANKÂ YOUÂ FROMÂ ALLÂ OFÂ USÂ ATÂ ROYALÂ PALMÂ CAPITALÂ DOTÂ NET

DOÂ YOUÂ HAVEÂ ANYTHINGÂ FORÂ HERZOGÂ INTERNATIONALÂ HOLDINGSÂ INCORPORATEDÂ ORÂ D HELLO

DOÂ YOUÂ NEEDÂ THESEÂ ORIGINALSÂ ANDÂ YOUÂ CANÂ CONTACTÂ MEÂ BACKÂ WHENÂ THEREÂ ISÂ

Reporting Owners 2

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### **PERFECT**

HOWÂ ABOUTÂ THISÂ MAKEÂ AÂ COPYÂ ANDÂ DOÂ NOTÂ FORGETÂ THATÂ THEÂ MOSTÂ IMPORTANTÂ

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.