

NATIONAL FINANCIAL SERVICES CORP  
 Form 5/A  
 August 05, 2011

**FORM 5**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).  
 Form 3 Holdings Reported Form 4 Transactions Reported

**ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person \*  
**HERZOG INTERNATIONAL HOLDINGS, INC.**

2. Issuer Name and Ticker or Trading Symbol  
**NATIONAL FINANCIAL SERVICES CORP [HZOG]**

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)

3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year)  
 08/04/2011

Director  10% Owner  
 Officer (give title below)  Other (specify below)  
 08/04/2011 9:15 AM chase.com / 08/04/2011 9:39 AM chase.com

33 TERRACE SW 8371 AVENUE

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)  
 08/04/2011

6. Individual or Joint/Group Reporting

(check applicable line)

BEAUTIFUL HAIR, FL 33155

Form Filed by One Reporting Person  
 Form Filed by More than One Reporting Person

(City) (State) (Zip)

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
				(A) or (D) Price			

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

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

(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr. 8)	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Securities (Instr. 3 and 4)	(Instr. 5)	(Instr. 5)
(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
HERZOG INTERNATIONAL HOLDINGS, INC. 33 TERRACE SW 8371 AVENUE BEAUTIFUL HAIR, FL 33155	X	X	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	X	X	08/04/2011 9:15 AM chase.com	08/04/2011 9:15 AM chase.com

## Signatures

http://mail.royalpalmbcapital.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).

ACTUALY I HAVE TO THINK A BIT I DO NEED TO MAKE A DEPOSIT AND DECLARE  
 EDDIE DARIO TOLEDO OR WHAT EVER YOUR NAME IS YOU WHOM ARE IN THIS PICT  
 MAY I HAVE A RECEIPT  
 THANK YOU FROM ALL OF US AT ROYAL PALM CAPITAL DOT NET  
 DO YOU HAVE ANYTHING FOR HERZOG INTERNATIONAL HOLDINGS INCORPORATED OR D  
 HELLO  
 DO YOU NEED THESE ORIGINALS AND YOU CAN CONTACT ME BACK WHEN THERE IS

PERFECT

HOW ABOUT THIS MAKE A COPY AND DO NOT FORGET THAT THE MOST IMPORTANT

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.