

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 24, 2008 8:00 am**  
**Secretary of State**

01-24-2008 90038 021 \*\*\*150.00

DOCUMENT # F97000006551

1. Entity Name  
EVGA CORPORATION



Principal Place of Business Mailing Address  
% JACQUELYN S. HESS, CPA  
37000 GRAND RIVER AVE. SUITE 130  
FARMINGTON HILLS, MI 48335-2881

2. Principal Place of Business - No P.O. Box # 3. Mailing Address  
29200 NORTHWESTERN HWY 29200 NORTHWESTERN HWY

Suite, Apt. #, etc. Suite, Apt. #, etc.  
150 150

City & State City & State  
SOUTHFIELD MI SOUTHFIELD MI

Zip Country Zip Country  
48034 USA 48034 USA

01092008 Chg-P CR2E034 (12/06)

4. FEI Number Applied For  
38-3383555 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GYONGYOSI, EVA  
TWO OCEAN LANE  
MANALAPAN, FL 33462

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PC  
NAME GYONGYOSI, EVA  
STREET ADDRESS 25900 ROMANY WAY  
CITY-ST-ZIP FRANKLIN, MI 48025 ☐ Delete

TITLE VVC  
NAME KARP, GABRIELLA  
STREET ADDRESS 6635 PLEASANT LAKE COURT  
CITY-ST-ZIP WEST BLOOMFIELD, MI 48322 ☐ Delete

TITLE SD  
NAME KARP, ALEXANDER  
STREET ADDRESS 6635 PLEASANT LAKE COURT  
CITY-ST-ZIP WEST BLOOMFIELD, MI 48322 ☐ Delete

TITLE TD  
NAME GYONGYESI, JOSEPH  
STREET ADDRESS 25900 ROMANY WAY  
CITY-ST-ZIP FRANKLIN, MI 48025 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Eva Gyongyosi  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-20-08  
Date Daytime Phone #