


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 02, 2007 8:00 am**  
**Secretary of State**

03-02-2007 90031 001 \*\*\*476.25

<b>DOCUMENT # P04000026487</b> 1. Entity Name <b>FEMA INVESTMENT GROUP, INC.</b>		
Principal Place of Business <b>2700 GLADES CIRCLE SUITE 111 WESTON, FL 33327</b>	Mailing Address <b>2700 GLADES CIRCLE SUITE 111 WESTON, FL 33327</b>	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  <b>NATHAN, RANDY J ESQ. 7805 S.W. 6TH COURT PLANTATION, FL 33324</b>		<b>DO NOT WRITE IN THIS SPACE</b>
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: _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE: _____		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input checked="" type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
<b>10. OFFICERS AND DIRECTORS</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D FERREIRA, EDUARDO 2019 HARBOR VIEW CIRCLE WESTON, FL 33327</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D FERREIRA, ALBANO 123 NORTHWEST BERKELEY AVENUE PORT SAINT LUCIE, FL 34986</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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.		
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <b>02-21-07</b> (786) 223-87-82 <small>Daytime Phone #</small>

**66003542**



01102007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>20-0713004</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**