

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 12, 2006 8:00 am**  
**Secretary of State**

01-12-2006 90187 050 \*\*\*150.00

DOCUMENT # P04000053843  
 1. Entity Name  
 EVA INVESTMENT GROUP, INC.



Principal Place of Business: 544 WASHINGTON AVENUE, MIAMI BEACH, FL 33139  
 Mailing Address: 544 WASHINGTON AVENUE, MIAMI BEACH, FL 33139

2. Principal Place of Business: 542 WASHINGTON AVE, Suite, Apt. #, etc.  
 3. Mailing Address: 542 WASHINGTON AVE, Suite, Apt. #, etc.

City & State: MIAMI BEACH, FL.  
 City & State: MIAMI BEACH FL.  
 Zip: 33139 Country: U.S.A.  
 Zip: 33139 Country: U.S.A.



01062006 Chg-P CR2E034 (11/05)

4. FEI Number: 20-0905034 Applied For: Not Applicable  
 5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent: HARARI, ERIC, 542 WASHINGTON AVENUE, MIAMI BEACH, FL 33139  
 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, 2006 Fee will be \$550.00  
 9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS HARARI, ERIC 542 WASHINGTON AVENUE MIAMI BEACH, FL 33139 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: Eric Harari 01/06/06 (305) 673.3948  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #