

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000004470

1. Entity Name

CAVALRY ENTERPRISES (TEXAS) INC.

Principal Place of Business

11811 North Freeway
Suite 630
Houston, TX 77060

Mailing Address

11811 North Freeway
Suite 630
Houston, TX 77060

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite 300

Suite, Apt. #, etc.

Suite 300

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

76-0313712

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Grutchfield, Dana
101 East Kennedy Blvd., Suite 2000
Tampa, FL 33602

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME PD
STREET ADDRESS Rusca, Fausto
CITY-ST-ZIP Via Maggio 1 CH-6900
Lugano, Switzerland ☐ Delete

TITLE
NAME VS
STREET ADDRESS Tombari, Michael G.
CITY-ST-ZIP 11811 North Freeway, Suite 630
Houston, TX 77060 ☐ Delete

TITLE
NAME VS
STREET ADDRESS Hatfield, Kenneth L.
CITY-ST-ZIP 11811 North Freeway, Suite 630
Houston, TX 77060 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS 11811 North Freeway, Suite 300
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 11811 North Freeway, Suite 300
CITY-ST-ZIP ☒ Change ☐ Addition

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

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

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vice President / Secretary

Date

Daytime Phone #

4A-01

281-820-0747

FILED
May 02, 2001 8:00 am
Secretary of State

05-02-2001 90171 022 ***150.00

00046279

DO NOT WRITE IN THIS SPACE

CR2E034 (11/00)