

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 19, 2005 08:00 AM
Secretary of State**

DOCUMENT # L75383

1. Entity Name
BOULEVARD SHOPPES II & III, INC.



Principal Place of Business Mailing Address
**11811 NORTH FREEWAY
SUITE 300
HOUSTON, TX 77060 US** **11811 NORTH FREEWAY
SUITE 300
HOUSTON, TX 77060 US**



DO NOT WRITE IN THIS SPACE

03302005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3021915 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when restating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	RUSCA, FAUSTO
STREET ADDRESS	VIA C.B. PIODA 14
CITY-ST-ZIP	CH-6900 LUGANO, SWIT.
TITLE	VP
NAME	HATFIELD, KEN
STREET ADDRESS	11811 NORTH FREEWAY 300
CITY-ST-ZIP	HOUSTON, TX
TITLE	ST
NAME	TOMBARI, MICHAEL G.
STREET ADDRESS	11811 NORTH FREEWAY 300
CITY-ST-ZIP	HOUSTON, TX

0000000316932
04/19/05-80097-015 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Michael G. Tombari
MICHAEL G. TO M TARI

4/14/05

281 820 0747

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #