

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90152 026 ***150.00

DOCUMENT # P10861

1. Entity Name

GULF SOUTH CENTER CONDOMINIUM NO. SIX INVESTMENT

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

C/O FIDINAM INVESTMENT

3. Mailing Address

C/O FIDINAM INVESTMENT

Suite, Apt. #, etc.

11811 N FWY, SUITE 300

Suite, Apt. #, etc.

11811 N FWY, STE 300

City & State

HOUSTON, TX 77060

City & State

HOUSTON, TX

Zip

Country

USA

Zip

77060

Country

USA

4. FEI Number

98-0078182

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

CT CORPORATION SYSTEM

Street Address (P.O. Box Number is Not Acceptable)

1200 S. PINE ISLAND ROAD

City

PLANTATION

FL

Zip Code
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.

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) ☒

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RUSCA, FAUSTO VIA MAGGIO 1, GB PIODA 14 LUGANO, SZ
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PIERSON TRUST (CURACAO) 6 JOHN B. GORSIRAWEG CURACAO, NA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M TOMBARI, MICHAEL G. 11811 N FWY, STE 300 HOUSTON, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M HATFIELD, KENNETH L. 11811 N FWY, STE 300 HOUSTON, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **MICHAEL G. TOMBARI**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(281) 820-0747

CR2E034B (12/01)

2001 UNIFORM BUSINESS REPORT (UBR)

ATTACHMENT

POSTED
4-24-01

DOCUMENT # P10861

1. Entity Name

GULF SOUTH CENTER CONDOMINIUM NO. SIX INVESTMENT

Principal Place of Business

% FIDINAM INVESTMENT CONSULTING, INC.
11811 N FREEWAY #300
HOUSTON TX 77060
US

Mailing Address

% FIDINAM INVESTMENT CONSULTING, INC.
118911 N FREEWAY #300
HOUSTON TX 77060
US

2. Principal Place of Business

11811 North Freeway

Suite, Apt. #, etc.

Suite 300

City & State

Houston, Tx

3. Mailing Address

11811 North Freeway

Suite, Apt. #, etc.

Suite 300

City & State

Houston, Tx



DO NOT WRITE IN THIS SPACE

4. FEI Number 98-0078182

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-instating)

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

TITLE	PD	<input type="checkbox"/> Delete
NAME	RUSCA, FAUSTO	
STREET ADDRESS	VIAG. B. PIODA 14	
CITY-ST-ZIP	LUGANO, SWITZERLAND	
TITLE	D	<input type="checkbox"/> Delete
NAME	PIERSON, TRUST (CURACAO)	
STREET ADDRESS	6 JOHN B. GORSIRAWEG	
CITY-ST-ZIP	CURACAO, NA	
TITLE	M	<input type="checkbox"/> Delete
NAME	TOMBARI, MICHAEL G.	
STREET ADDRESS	11811 NORTH FREEWAY, #300	
CITY-ST-ZIP	HOUSTON TE	
TITLE	M	<input type="checkbox"/> Delete
NAME	HATFIELD, KENNETH L	
STREET ADDRESS	11811 NORTH FREEWAY, #300	
CITY-ST-ZIP	HOUSTON TE	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addit
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addit
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addit
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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SIGNATURE:

[Signature]

Managing Director

4-19-01

281-820-0747

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone