2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 20, 2007 8:00 am Secretary of State DOCUMENT # P10861 04-20-2007 90079 036 ***150 00 **GULF SOUTH CENTER CONDOMINIUM NO. SIX** INVESTMENT N.V. Principal Place of Business Mailing Address % FIDINAM INVESTMENT CONSULTING, INC. % FIDINAM INVESTMENT CONSULTING, INC. 40072400 11811 N FREEWAY #300 118911 N FREEWAY #300 HOUSTON, TX 77060 HOUSTON, TX 77060 2., Principal Place of Business - No P.O. Box # 90 AMENIC AD MEGHTY THERMS 3. Mailing Address 04102007 Chg-P CR2E034 (12/06) City & State 4. FEI Number Applied For 98-0078182 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 Zip Code City 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 reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE PD Delete TITLE ☐ Change ☐ Addition RUSCA, FAUSTO NAME NAME STREET ADDRESS STREET ADDRESS VIA MAGGIO 1 GB PIODA 14 CITY-ST-ZIP LUGANO, SWITZERLAND CITY-ST-ZIP D ☐ Delete TITLE Change ■ Addition PIERSON, TRUST (CURACAO) NAME NAME 6 JOHN B. GORSIRAWEG STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP CURACAO, NA, М ☐ Delete TITLE ☐ Change ■ Addition TITLE TOMBARI, MICHAEL G. NAME NAME 11811 NORTH FREEWAY, #300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOUSTON, TX CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE HATFIELD, KENNETH L NAME NAME STREET ADDRESS 11811 NORTH FREEWAY, #300 STREET ADDRESS CITY-ST-ZIP HOUSTON, TX 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.

TITLE

NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE: MICHAEL 6. THE BOAT OWN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7tP

☐ Delete

☐ Delete

Duy in 4/13/07

☐ Change

Change

☐ Addition

Addition

FILED