

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90371 049 ***150.00

DOCUMENT # P10862

1. Entity Name

**GULF SOUTH CENTER CONDOMINIUM NO. FIVE
INVESTMENT N.V.**



Principal Place of Business

**11811 N FREEWAY
STE 300
HOUSTON, TX 77060 US**

Mailing Address

**11811 N FREEWAY
STE 300
HOUSTON, TX 77060 US**

14004602



02062004 No Chg-P CR2E034 (10/03)

4. FEI Number

98-0086490

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	RUSCA, FAUSTO
STREET ADDRESS	VIAG B PIODA 14
CITY-ST-ZIP	LUGANO, SWITZERLAND,
TITLE	VD
NAME	PIERSON TRUST (CURACAO)
STREET ADDRESS	6 JOHN B. GORSIRAWEG
CITY-ST-ZIP	CURACAO, NA,
TITLE	M
NAME	TOMBARI, MICHAEL G
STREET ADDRESS	11811 N FREEWAY, #300
CITY-ST-ZIP	HOUSTON, TX
TITLE	M
NAME	HATFIELD, KENNETH L
STREET ADDRESS	11811 N FREEWAY, #300
CITY-ST-ZIP	HOUSTON, TX
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/19/04
Date

281 820 0747
Daytime Phone #