

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

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

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**



03302005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
98-0086490

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**

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

000000316839
04/19/05-80097-019 150.00

**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 4/14/05 281 820 0747
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #