

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 22, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P97000080024

1. Entity Name  
NEW SMYRNA CONDO BUILDING NO. 1, INC.



Principal Place of Business

1215 GRESSNER DR  
HOUSTON, TX 77055

Mailing Address

1215 GRESSNER DR  
HOUSTON, TX 77055



01192005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
58-2343698

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

GRAHAM, JESSE E  
369 NORTH NEW YORK AVENUE  
THIRD FLOOR  
WINTER PARK, FL 32789

**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 VT  
NAME SILVESTRI, DAN  
STREET ADDRESS 1215 GRESSNER DR  
CITY-ST-ZIP HOUSTON, TX 77055

TITLE PS  
NAME GIULIO, TRULLI  
STREET ADDRESS 21 KING ST W #809 BOX #66  
CITY-ST-ZIP HAMILTON, ONT, CN l8p 4w7

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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02/22/05-80046-017 150.00

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/1/05 (713) 785-6272