## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **F97000002706**1. Corporation Name

21ST CENTURY CAPITAL, INC.

## **FILED** Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90027 040 \*\*\*150.00



							KI <b>ug</b> il <b>e b</b> eri e <b>bb</b> i
Principal Place of Business Mailing Address							
123 NW 13TH ST STE 313 129 NW 13TH ST STE 313							
BOCA RATON FL 33432 BOCA RATON FL 33432				DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed	FACE	
					05/21/1997		
2. Principal P	2a. Mailing Address	/ · / · // - / / · / / / / / / / / / / /		4. FEI Number		Applied For	
21 // 00	W. Camino Real	26 4014 Fraion fointelor		65-0727244		lot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired   \$8.75 Additional Fee Required			
City & State		Gity & State		6. Election Campaign Financing	\$5.00	May Be	
Zip Country (10		28 bout Later Country		<u> </u>	Trust Fund Contribution  8. This corporation owes the current year Intar		to Fees
≕ <sup>ℤֈֈ</sup> λλ Ն	133 [25] CONTENTS 14	29 3346 30		SA	·	]Yes	□No
24 )	9. Name and Address of Current				10. Name and Address of New Registered A		
	3. Hame and Addition of Carrette	The State of the S	81	Name			
TESSER, TED							
	NW 13TH ST STE 313		82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
BOC	CA RATON FL 33432		83			**	-
			84	City	FL	85 Zip	Code
11 Pureuant	to the provisions of Sections 607 0502	2 and 607 1508 Florida Statutes, 1	the above	-named corp	oration submits this statement for the purpose of cl	nanging it	ts registered
office or r	registered agent, or both, in the State or im familiar with, and accept the obligati	of Florida. Such change was autho	nzed by 1	ine corporatio	on's board of directors. I hereby accept the appoint	nent as i	registered
SIGNATURE				<u> </u>	d when reinstating) DATE		
	Signature, typed or printed name of registered agent			signature required	d when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	ORS IN 12
12.	OFFICERS AND	DELETE	13.			Change	
TITLE		_ beech	1.2 NAME				_
NAME	SACKS, MARK			LDBBECC			1
STREET ADDRESS	123 NW 13TH ST STE 313		1.3 STREET				i
CITY-ST-ZIP	BOCA RATON FL 33432	☐ DELETE	1.4 CITY-ST	-ZIP		Change	Addition
TITLE		☐ perste	2.1 TITLE				
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET				
CITY-ST-ZIP			2.4 CITY-S	r-ZIP		Change	Addition
TITLE		☐ DELETE	3.1 TITLE			Change	. [] \(\dag{\alpha}\)
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-S	- ZIP			<b>—</b>
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				-
STREET ADDRESS			4.3 STREET	ADDRESS			1
CITY-ST-ZIP			4.4 CITY-ST	-ZIP	·	<del></del>	
TITLE		☐ DELETE	5.1 TITLE		•	Change	Addition
NAME		•	5.2 NAME	1			ļ
STREET ADDRESS			5.3 STREET	ADDRESS			1
CITY-ST-ZIP			5.4 CITY-ST	- ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME	ł			.
STREET ADDRESS			6.3 STREET	ADDRESS	,		
CITY-ST-ZIP			6.4 CITY-ST	-ZIP			

14. 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 annual report or supplemental annual report is tive 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 preceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on phast technique with an address, with all other like empowered.

SIGNATURE: \_