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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9500003080 1. Corporation Name

21ST CENTURY PAVILION, INC.

Principal Place of Business	Mailing Address
6132 U.S. HIGHWAY 19 NORTH HEW PORT RICHEY FL 34652	GEORGE N KLIMIS. PA 30 NORTH RING AVE. STE 400 TARPON SPRINGS FL 34689 US

21	Suite, Apt #, etc	Suite, Apt. #,	eto
22	City & State	27 City & State	
23		28	
	Zip Country	Zφ	Country
24	25	29	30
	9. Name and Address of Cur	rent Registered Apent	ì

KLIMIS, GEORGE N 30 N RING AVE SUITE 400 TARPON SPRINGS FL 34689

Katherine	Harris	

FILED

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SECRETARY OF STATE TALLARASSEE, FLORIDA



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3.	Date incorporated or Ottalired		
	01/04/1995		
4.	F E.I Number		Applied For
	59-3291019		Applied For Not Applical
5.	Certificate of Status Desired	[]	\$8.75 Additional Fee Required

Street Address (P.O. Box Number is Not Acceptable)

\$5.00 May Be

Personal Property Tax []Yes

10. Name and Address of New Registered Agent

ity	FL	85	Zıpı Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered

81 Name

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12.	Signature, typed of pricted name of registered agent and title if app OFFICERS AND DIRECTO		<b>1</b> 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	[ i DELETE	1 ) TITLE	[ Change [ Addit
NAME	BAIN, RUSSELL T		12 NAME	4000028230346
STREET ADDRESS	6121 FJORD WAY		13 STREET ADURESS	- 03/30/9901027001
Cffy-ST-ZiP	NEW PORT RICHEY FL 34652		14 CITY-51-2IH	కాలు తెల్లా చెల్లా కొట్టికి (జాలాగ్రెక్) మూముక్కిక్కు కుడ్కు ముందుకు కూడు చెల్లు
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14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes, it further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logial 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 12 or Block 13 if changed, or by an attachment with agraddress with all other like empowered.

SIGNATURE:

ME OF SIGNING OF

727 -846-1844

CR2E034 (11/98)