Filing fee: \$15.00

To be filed annually between January 1st and March 1st

## State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

			Annual	Report for t	he year	1983	-
First: 7	the name of the	corporatio	n is CON	STANTINE P.	PAGONIS 1	M.D. INC.	-
SECOND:	It is incorpora	ted under	the laws	of RHODE I	SLAND		
THIRD:	Character of bus	siness, brief Iedical	ly stated,	is			
Fourth:	If foreign con	poration, a	address of	f its principa	al office		•
	Business addres				ts will be	mailed to this	
Sixth: 1	Names and add	resses of its	s director	rs and offic	ers:		
ſ	(Addresses must include street and number, if any)						
Na onstantine P	me Pagonis M.D.	Office Director		106 Nate W	Address	ghway, Cumber	land,F
		Director	,,,,,,,		*************************		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	~~~~~	Director	*******	***************************************			
		President	100000				
		Vice Pres	ident.				
					***************************************	***************************************	
		_		***************************************			
	ace is needed, atta						
SEVENTH:	Number of S	hares auth	orized:			ar Value atement that	
No. of Share	s (	Class		Series	share	s are without ar value	
600		Common			1.0	00 Par Value	
Еіснтн:	Number of Sh	ares issued	l:		P	ar Value	
No. of Share	s	Class		Series	shares	atement that s are without ar value	
			2 15 83				
ted: Februa	ry	19.83		CONSTANTINE	***************************************	IS, M.D. INC.	
	FEB 18	1983	Hitles !	redonts Plesisen	t Type	ný m.D	
		R	(R	eport must be	signed by a	n officer)	
if the corp Form #9 n	ooration has char nust be filed. Pleas	nged its regi se contact Co	stered-offi orperation (	ice and/or its Division for in	registered formation. 2	agent, 77-3040	