

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 20, 2002 8:00 am
Secretary of State

08-20-2002 90129 012 ***150.00

DOCUMENT # P01000075356

1. Entity Name
PERPETUA'S ENTERPRISES, INC.

Principal Place of Business

1041 SW 9TH TERR.
 BOCA RATON FL 33436

Mailing Address

1041 SW 9TH TERR.
 BOCA RATON FL 33436

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1128975

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FUNG, PERPETUA
 1041 SW 9TH TERR.
 BOCA RATON FL 33436

Name


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

City

FL

Zip Code

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)

7-13-02
 DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
 NAME **FUNG, PERPETUA**
 STREET ADDRESS **1041 SW 9TH TERR.**
 CITY-ST-ZIP **BOCA RATON FL 33436**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 STREET ADDRESS
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 CITY-ST-ZIP

13. 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 11 or Block 12 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

7-13-02

Date

561-392-4101

Daytime Phone #

CR2E034 (4/02)

Attachment

975914

PERPETUA'S ENTERPRISES, INC.
1042 S.W. 9TH TERRACE
BOCA RATON, FL 33486

August 16, 2002

Division of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Subject: Perpetua's Enterprises Inc.,
Ref Number: P01000075356

Dear Sir/Madam:

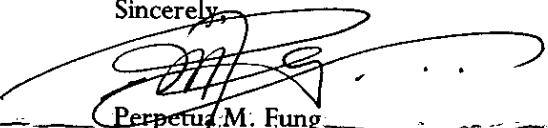
Enclosed is our application with a check for \$150.00 to cover the unpaid Uniform Business Report fee.

My company is a small business, which was started during the past year. Unfortunately we were unfamiliar with the requirements that the State of Florida has requiring the filing of the Uniform Business Report. Apparently a report was not sent to us to enable us to stay current with all requirements and now we are faced with a possible penalty for this report.

I am requesting your understanding and would appreciate it if the \$400.00 penalty fee were waived, as at this time any additional fees would be a hardship on my company's cash flow.

Thanking you in advance for your help in this matter.

Sincerely,



Perpetua M. Fung
President

Encl.: