

FROM : LUDWIG & MASTER
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED

Jun 01 1998 8:00am
Secretary of State

DOCUMENT # **PA7000084017**
1. Corporation Name
PERPETUAL CONCEPTS, INC.

Principal Place of Business Mailing Address - Same
**1070 STARDUST WAY
DELAND, FL. 32720**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 26. Mailing Address
21 **1070 STARDUST WAY** 26 **1070 STARDUST WAY**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **DELAND, FL** 27 **DELAND, FL**
City & State City & State
23 **32720** 28 **32720** 29 **USA**
Zip Country Zip Country

3. Date Incorporated or Qualified
Sept. 26, 1997
4. Fed. Number **59-3510420** Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required
6. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution Added to Fees
7. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
**CHARLES E. IRWIN
1070 STARDUST WAY
DELAND, FL 32720**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title (See Note) (NOTE: Registered Agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS
1.1 TITLE ☐ DELETE
PRESIDENT CHARLES E. IRWIN
1.2 NAME
1070 STARDUST WAY
1.3 STREET ADDRESS
DELAND, FL 32720
1.4 CITY-ST-ZIP
2.1 TITLE ☐ DELETE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☐ DELETE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ DELETE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ DELETE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 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 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 registered agent 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 in an attachment with an address.

SIGNATURE: **CHARLES E. IRWIN** 4.29.98
Signature AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR Date Daytime Phone # 00000000