

**2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2006**

DOCUMENT # A05000001634

1. Entity Name

U.S. GLOBAL CONSULTANTS, LTD



FILED

06 MAY -1 AM 11:19

SECRETARY OF STATE
TALLAHASSEE FLORIDA



Principal Place of Business

1401 NW 92ND AVE.
PEMBROKE PINES FL 33024

Mailing Address

1401 NW 92ND AVE.
PEMBROKE PINES FL 33024
US

2. Principal Place of Business

1600 S. Dixie Highway
Suite 110

3. Mailing Address

Suite, Apt. #, etc.

City & State

BOCA RATON, FLORIDA

City & State

Zip

33432

Country

U.S.A.

Zip

Country

4. FEI Number

20-4482324

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

1st MOORE

CR2E003 (10/05)

6. Name and Address of Current Registered Agent

RAMOS, ERNESTO G
1401 NW 92ND AVE.
PEMBROKE PINES FL 33024

7. Name and Address of New Registered Agent

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

DATE

FILE NOW!!! Fee is \$500. * After May 1, 2006, fee will be \$900. *** Make check payable to Florida Department of State.**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

| | |
|----------------|-------------------------|
| DOCUMENT # | |
| NAME | RAMOS, ERNESTO G |
| STREET ADDRESS | 1401 NW 92ND AVE. |
| CITY-ST-ZIP | PEMBROKE PINES FL 33024 |
| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| DOCUMENT # | |
| NAME | |
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| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

13. ADDRESS CHANGES ONLY

| | |
|----------------|--|
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| STREET ADDRESS | |
| CITY-ST-ZIP | 000075029660 05/22/06--01045--013 ***508.75 |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
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| CITY-ST-ZIP | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Ernesto G. Ramos

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

April 28, 2006 954-732-6685

Date

Daytime Phone #

STAPLE CHECK HERE