## F99000000171.

To: Qualification/Tax Lien Section Division of Corporations			
SUBJECT: UNIVERSES MANAGEMENT, INC. (UMI)			
(Name of corporation - must include suffix)			
Dear Sir or Madam: 4000028972848 -06/07/9901157006			
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.			
Please return all correspondence concerning this matter to the following:			
LINDA BATDORF			
(Name of Person)  UMT  (Firm/Company)			
<u>UMT</u> § SET			
(Firm/Company)			
1940 RAINBOW DR			
(Address)			
CLEARWATER, PL 33765			
(City/State/Zip)			
Should you need to call someone concerning this matter, please call:			
LINDA OR CHARTES BATDICET (727) 4613132 899-3111			
(Name of Person) (Area Code & Daytime Telephone Number)			
Doguetran O			
STREET ADDRESS: MAILING ADDRESS:			
Qualification/Tax Lien Section Qualification/Tax Lien Section			
Division of Corporations  409 E. Gaines St.  Division of Corporations  P.O. Box 6327  Verifyer			
Tallahassee, FL 32399  Tallahassee, FL 32314  Acknowled Fement			
Enclosed is a check for the following amount:			
\$70.00 Filing Fee \$ \$78.75 Filing Fee & \$78.75 Filing Fee & \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy Certified Copy			



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 11, 1999

LINDA BATDORF 1940 RAINBOW DRIVE CLEARWATER, FL 33765

SUBJECT: UNIVERSES MANAGEMENT, INC.

Ref. Number: W99000013706

99 JUN 21 PM 1:57

We have received your document for UNIVERSES MANAGEMENT, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

The document must have original signatures.

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline Document Specialist

Letter Number: 699A00031668

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

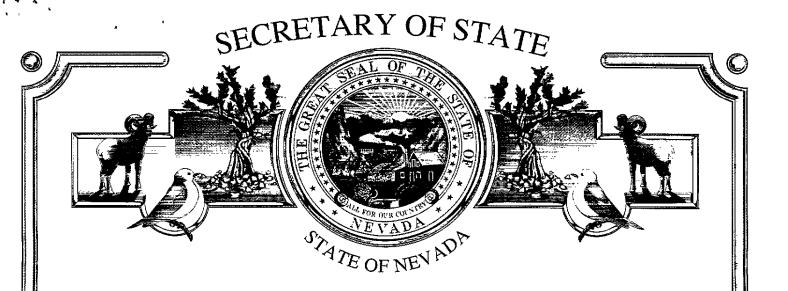
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. UNIVERSES MANAGEMENT, INCORP	PORATED
(Name of corporation; must include the word "INCORPORATED	", "COMPANY", "CORPORATION" or
words or abbreviations of like import in language as will clearly in natural person or partnership if not so contained in the name at pr	
•	,
2. NEVADA (State or country under the law of which it is incorporated)  3.	88-0404362 19 =
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
4. Aug 17, 1998 5. (Duration) (Durat	PERPENAL N 97-7
6. APRIL 1999 (Date first transacted business in Florida.) (SEE SECTIONS)	Profis
(Date first transacted business in Florida.) (SEE SECTIONS	3 607.1501, 607.1502 and 817.155, F.S.) ATA
7. 1940 RAINBOW DR	7
CLEAR WATER, FL 33765 (Current mailing address	-
(Current mailing address	s)
8. TO ENGAGE IN ANY LAWFUL ACTION	ITTES UNDER THE LAWS OF THE STATE OF NEVA
(Purpose(s) of corporation authorized in home state or cour	stry to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.	O. Box or Mail Drop Box NOT acceptable)
Name: LINDA BATDORF	-
	•••• •• •• •• •• •• •• •• •• •• •• •• •
Office Address: 1940 RANBOW DR	<del>_</del>
CLEARWATER	Florida. 33765
	(Zip code)
10. Registered agent's acceptance:	
and the second s	
Having been named as registered agent and to accept service of pro	cess for the above stated corporation at the place designated
in this application, I hereby accept the appointment as registered ag comply with the provisions of all statutes relative to the proper and	ent and agree to act in this capacity. I further agree to complete performance of my duties, and I am familiar with
and accept the obligations of my position as registered agent.	Kula Potter

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

(Registered agent's signature)

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)	
A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	
Chairman: CHARLES E. BATDORF	W.
Address: 1940 RAINBOW DR	
CLEARWATER, FL 33765	,
Vice Chairman/DIRECTOR; LINDA D. BATDORF	<u>-</u> -
Address: 1940 RAINBOW DR.	
CLEARWATER FZ 33765	0 UI
Director:	SECRI ISIOP
Address:	2 OF S
	DRPC PM
Director:	RATIO
Address:	ONS
	,
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	
President: CHARLES E. BATDORF	
Address: 1940 RANBOW DR	
CLEARWATER FL 33765	<u></u>
Vice President:	
Address:	
Secretary: LINDA D. BADDORF	
Address: 1940 RANBOW DR	
CLEARWATER PL 33765	
Treasurer: LINDA D. BATDORF	. 5
Address: 1940 RAINBOW DR	
CLEARWATER, FL 33765	
^	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
14. LINDAD. BATDORE VICE CHAIRWOMAN / SECY 17	REASINIER.
(Typed or printed name and capacity of person signing application)	



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, and limited-liability partnerships pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **UNIVERSES MANAGEMENT**, **INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since August 17, 1998, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on May 28, 1999.

Secretary of State

Continuation Clark