

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 30, 2001 8:00 am**  
**Secretary of State**

04-30-2001 90416 002 \*\*\*150.00

**DOCUMENT # P93000024134**

1. Entity Name

**PATAGONIA GOLD CORPORATION**

Principal Place of Business

Mailing Address

**1060 ALBERNI STREET  
 SUITE 1505  
 VANCOUVER BC V6-E4K2  
 US**

**1060 ALBERNI STREET  
 SUITE 1505  
 VANCOUVER BC V6-E4K2  
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country  
**CANADA**

Zip

Country  
**CANADA**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LITTMAN, ERIC  
 7659 SW 104 STREET  
 SUITE 210  
 MIAMI FL 33156**

Name

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

City

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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 \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**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 **PD** ☐ Delete  
 NAME **JENKINS, DAVID**  
 STREET ADDRESS **1505-1060 ALBERNI STREET**  
 CITY-ST-ZIP **VANCOUVER BC V6-E4K2**

☐ Change ☐ Addition

TITLE **DS** ☐ Delete  
 NAME **VARELA, COSME M BECCAR**  
 STREET ADDRESS **RECONQUISTA 657**  
 CITY-ST-ZIP **BUENOS AIRES ARGENTINA UK 1373**

☐ Change ☐ Addition

TITLE **D** ☐ Delete  
 NAME **CACACE, ANTONIO**  
 STREET ADDRESS **WEST GLAMBREAN**  
 CITY-ST-ZIP **WEST GLAMBREAN SA11ZX UK SA1-12JX**

☐ Change ☐ Addition

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☒ Addition  
**CS**  
**RICHARDSON, A. CAMERON**  
**1505-1060 Alberni Street**  
**VANCOUVER, BC CANADA V6E 4K2**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

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

Date

Daytime Phone #

CR2E034 (10/00)