

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 15, 2000 8:00 am
Secretary of State

08-15-2000 90005 044 ***550.00

DOCUMENT # P95000027259

1. Entity Name
UNIVERSE GOLD U.S.A. CORP.

Principal Place of Business

1717 N. BAYSHORE DRIVE
 SUITE 208
 MIAMI FL 33132
 US

Mailing Address

1717 N. BAYSHORE DRIVE
 SUITE 208
 MIAMI FL 33132

2. Principal Place of Business

2121 Ponce de Leon Blvd.

Suite, Apt. #, etc.

Suite 410

City & State
Coral Gables, FL

Zip
33134

Country
U.S.A.

3. Mailing Address

2121 Ponce de Leon Blvd.

Suite, Apt. #, etc.

Suite 410

City & State
Coral Gables, FL

Zip
33134

Country
U.S.A.



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0570171**

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PATARO, MARIO
 1717 N. BAYSHORE DRIVE
 SUITE 208
 MIAMI FL 33132

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
2121 Ponce de Leon Blvd.
Suite 410
 City **Coral Gables** **FL** Zip Code **33134**

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]*

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

(NOTE: Registered Agent signature required when reinstating)

DATE **Aug. 7, 2000**

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, 2000 Min. 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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
	P			<input checked="" type="checkbox"/>
	PATARO, MARIO	1717 N. BAYSHORE DRIVE, #208	MIAMI FL 33132	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
	President			<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Patara Mario	2121 Ponce de Leon Blvd, #410	Coral Gables, FL 33134	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 info empowered.

SIGNATURE: *[Signature]*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE **Aug. 7, 2000** (305) 445-0332
 Daytime Phone #

CR2E034 (5/00)