2005 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:

Secretary of State 02-04-2005 90099 001 *1.861.25 **DOCUMENT # H69818** FLAGLER-MARGARITA RACING, INC. Principal Place of Business Mailing Address 66001102 401 NW 38TH CT 401 NW 38TH CT P. O. BOX 350940 P. O. BOX 350940 MIAMI, FL 33135 MIAMI, FL 33135 01042005 CR2E034 (10/03) No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0033139 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HAVENICK, FRED DO NOT WRITE 401 N.W. 38TH CT. MIAMI, FL 33126, FL IN THIS SPACE 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 il applicable (NOTE: Registered Agent signature required when rainstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PED TITLE HAVENICK, FRED NAME STREET ADDRESS 401 N.W. 38TH CT. MIAMI, FL 33/26 CITY-ST-ZIP TITLE HAVENICK, BARBARA NAME STREET ADDRESS 401 N.W. 38TH CT. MIAMI, FL 33/26 CITY-ST-ZIP TITLE AMOUR, IOABELLE 401-N.W. 3871T CT. STREET ADDRESS DO NOT WRITE CITY-ST-ZIP MIAMI; PL IN THIS SPACE HECHT, FLORENCE NAME STREET ADDRESS 401 N.W. 38TH CT. CITY-ST-ZIP MIAMI, FL 33/26 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. 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 end 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Feb 04, 2005 8:00 am

Daytime Phone #