

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

ATX1

DOCUMENT # 801000104468
 1. Entity Name
 EXCEL RACING STABLES, INC.

FILED

05 FEB 23 AM 10:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2. Principal Place of Business
1600 SW 63RD STREET RD
 Suite, Apt. #, etc.
10390 W. Highway 326
 City & State
OCALA, FL
 Zip 34482 Country
34476-0855

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

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4. FEI Number
59-3741635
 Applied For
 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent
 Name
Rudy Delguidice
 Street Address (P.O. Box Number is Not Acceptable)
10390 W. Highway 326
 Ocala
 City
 FL Zip Code
34482

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 *Rudy Delguidice* DATE 11-16-04
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00
 After May 1, Fee is \$550.00
 Amended UBR is \$61.25
 Make Check Payable to: Florida Department of State

9. Election Campaign Financing \$5.00 May Be Added to Fees
 Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Rudy Delguidice President 10390 W. Highway 326 Ocala FL 34482</i>
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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 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Rudy Delguidice* (352) 226 4248
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #