## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000071317

Entity Name: EXSEL AUTO, INC.

## FILED Apr 15, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
3416 SHADER RD. #112 ORLANDO, FL 32808				3416 SHADER RD. #112 ORLANDO, FL 32808				
				New Mailing Address:				
ORLANDO, FL 32808			3416 SHADER RD. #112 ORLANDO, FL 32808					
FEI Number:	82-0551789	FEI Number Applied For ( )	FEI Nun	nber Not Appli	icable ( )	Certificate of Sta	atus Desired()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
BRANKER, 343 FLYRO ORLANDO, The above i	D CIRCLE FL 32808	US ubmits this statement for the pur	rpose o	343 FLYRO ORLANDO	, FL 32808	US ffice or registere	ed agent, or both,	
in the State					_	-		
SIGNATUR	E: DAVID R.					04/15/20	05	
		c Signature of Registered Agent	t			Date		
Election Campaign Financing Trust Fund Contribution ( ).								
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip: Title:	ROSE, ALLISON 3009 WINFIELD ORLANDO, FL	ST.		Title: Name: Address: City-St-Zip: Title:		Change ( ) Addition		
Name: Address: City-St-Zip:	BRANKER, DAVI 343 FLYROD CI ORLANDO, FL	D RCLE		Name: Address: City-St-Zip:	BRANKER, DAV 343 FLYROD C ORLANDO, FL	IRCLE	OII	
Title: Name: Address: City-St-Zip:	O (X) TREVOR, BESS 343 FLY ROD ORLANDO FL, F			Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	on	
Title: Name: Address: City-St-Zip:	O () WILLIAMS, ALEG 5815 WOODLAI TAMARAC, FL 3	ND BLVD		Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	on	
Title: Name: Address: City-St-Zip:	O () CHAMBERS, RC 5815 WOODLAI TAMARAC, FL 3	ND		Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	on	
Title: Name: Address: City-St-Zip:	O () PETERSON, JOS 4211NORTH OB ORLANDO, FL 3	T D7		Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	on	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

	Flacture is Circuit of		D-1-	
SIGNATURE:	DAVID R. BRANKER	Р	04/15/2005	