


2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 FEB -7 AM 9:58

DOCUMENT # A0200000718 1. Entity Name 22 PARK & SHOP LTD.			
Principal Place of Business 4031A WILLIAM PENN HIGHWAY MONROEVILLE, PA 15146		Mailing Address 2851 SOUTH OCEAN BLVD., #7B BOCA RATON, FL 33432	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip		Country	
		02022005 Chg-LP CR2E003 (10/03)	
		4. FEI Number APPLIED FOR	
		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HOCHHAUSER, BYRON L 2851 SOUTH OCEAN BLVD., #7B BOCA RATON, FL 33432		7. Name and Address of New Registered Agent Name <u>Stacy Calvert</u> Street Address (P.O. Box Number is Not Acceptable) <u>1222 NW 14th St</u> City <u>Boca Raton</u> FL Zip Code <u>33486</u>	
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 <u>Stacy Calvert</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		DATE <u>2/2/05</u>	
9. Capital Contributions as Shown on record. \$1,153,955.00		10. Amount of Capital Contributions in FLORIDA to date.	
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.			
12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	HOCHHAUSER, BYRON L	STREET ADDRESS	
NAME	2851 SOUTH OCEAN BLVD., #7B	CITY-ST-ZIP	
STREET ADDRESS	BOCA RATON, FL 33432		
CITY-ST-ZIP			
DOCUMENT #	CALVERT, STACY	STREET ADDRESS	
NAME	1222 N.W. 14TH PLACE	CITY-ST-ZIP	
STREET ADDRESS	BOCA RATON, FL 33486		
CITY-ST-ZIP			
DOCUMENT #	KAVANAGH, JORDANNA	STREET ADDRESS	
NAME	9464 STATE ROUTE 68	CITY-ST-ZIP	
STREET ADDRESS	RUSHVILLE, OH 43447		
CITY-ST-ZIP			
DOCUMENT #	DOJONOVIC, THOMAS	STREET ADDRESS	
NAME	219 FIESTA DRIVE	CITY-ST-ZIP	
STREET ADDRESS	PITTSBURGH, PA 15239		
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes			
SIGNATURE: <u>Stacy Calvert</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>		DATE <u>2/2/05</u> DAYTIME PHONE # <u>561-417-0720</u> <small>Date Daytime Phone #</small>	

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