2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A22488 1. Entity Name				FILED	
MERRITT ISLAND MART PLAZA, LTD.				SECRETARY OF STATE DIVISION OF CORPORATIONS	
Principal Place of Business Mailing Address * DAVID KRUZEL * DAVID KRUZEL			дг	00 MAY -3 PM 1: 33	
8181 W. BROWARD BLVD. SUITE 350 PLANTATION FL 33324 PLANTATION FL 33324-2033			· · ·		
2. Principal Place of Business 3. Mailing A		3. Mailing Address		L 1861/101/1 (DITO FIREIN BIRBAF TOTAL TOTAL BIRTH GUIDE BYBAF DUDIN BURH BURH UNDIN	
Suite, Apt. #, etc. Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & State		City & State		4. FEI Number 59-2669915 Applied For Not Applicable	
Zip	Country Zip C		Country	5. Certificate of Status Desired \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
			Name		
WACKS, EDWARD 8181 W. BROWARD BLVD. SUITE 350			Street Addr	Street Address (P.O. Box Number is Not Acceptable)	
PLANTATION FL 33324					
the transfer of the second			City	FL Zip Code	
8. The above	named entity submits this statement for	the purpose of changing its re	gistered office or rec	gistered agent, or both, in the State of Florida.	
SIGNATURE Edward Househ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE DATE					
9. Capital Contributions as Shown on record. 10. Amount of Capital Contributions in FLORIDA to date. 11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION					
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#	AMERICAN FINANCIAL REALI 100: SOUTH: PINE ISLAND RD., STE 350		STREET ADDRESS	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
NAME STREET ADDRESS			CITY-ST-ZIP	8/81 WEST BROWARD DEND SUPE 350	
CITY-ST-ZIP	PLANTATION PL 33324		STREET ADDRESS	P(A)TOTOM, FE 33324	
NAME	'				
STREET ADORESS CITY-ST-ZIP			CITY-ST-ZIP	- 100009995014	
DOCUMENT# NAME		•	STREET ADORESS	1000032875014 -06/13/0001078029 	
STREET ADOR SS CITY+ST+ZIP	·		CITY-ST-ZIP		
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DOCUMENT #			STREET ADDRESS		
STREET ADDRESS CITY - ST - ZIP			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					