

FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP  
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Sandra B. Martin Secretary of State DIVISION OF CORPORATIONS
1. Name of Limited Partnership  SHOPPER'S SQUARE, LIMITED	1a. DOCUMENT #  A27304  94-AP cm	FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 99 FEB 15 AM 3:14
2. Mailing Address  3825 HENDERSON, #205 TAMPA FL 33629	2a. Principal Office Address  3825 HENDERSON #205 TAMPA FL 33629	3. Date Formed or Registered  11/01/1988
4. Suite, Apt. #, etc.		3a. Date of Last Report  02/05/1998
5. City & State  TAMPA, FL	6. Zip	4. State or Country of Formation  FL
7. Zip 33609 Country USA	8. Country	5a. Capital Contributions as Shown on record  \$195.00
9. Name and Address of Current Registered Agent  STEWART, RANALD JR. 3825 HENDERSON, #205 TAMPA FL 33629		6. FEI Number  59-2935297
		7. Certificate of Status Desired  <input type="checkbox"/> \$8.75 Additional Fee Required
		8. Make check payable to Dept. of State (See reverse side for fee information)

3. Date Formed or Registered  11/01/1988	5a. Capital Contributions as Shown on record  \$195.00
3a. Date of Last Report  02/05/1998	5b. Amount of Capital Contributions in FLORIDA to date:
4. State or Country of Formation  FL	
6. FEI Number  59-2935297	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
7. Certificate of Status Desired  <input type="checkbox"/> \$8.75 Additional Fee Required	
8. Make check payable to Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent  STEWART, RANALD JR. 3825 HENDERSON, #205 TAMPA FL 33629		10. If changed, new Registered Agent/Office  Name STEWART, RANALD JR. Street Address (P.O. Box Number Is Not Acceptable) 3006 SWANN AVENUE Suite, Apt. #, etc. City TAMPA Zip FL Country 33609 Country	
10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.			
SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.			
11. Name(s) of General Partner(s)  STEWART, RANALD JR.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)  3825 HENDERSON	11b. City, State & Zip Code  TAMPA FL 33629	11c. Registration/ Document Number  4100002787574--5 -02/25/99-01076-006 ***141.25 ***141.25

CR2E03 (8/98)

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

Ranald Stewart

Typed or Printed Name of General Partner Signing Form

DATE JAN 4 1999

Daytime Telephone Number 813-354-8450

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