


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCUMENT # A31616					
1. Entity Name THE FESTIVAL FLEA MARKET, LTD.					
Principal Place of Business 2900 W. SAMPLE ROAD POMPANO BEACH, FL 33073			Mailing Address 2900 W. SAMPLE ROAD POMPANO BEACH, FL 33073		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 23-2532632	
5. Certificate of Status Desired <input checked="" type="checkbox"/> Chg-LP				CR2E003 (10/03)	
6. Name and Address of Current Registered Agent SHOOSTER MANAGEMENT, INC. 2900 W. SAMPLE ROAD POMPANO BEACH, FL 33073				7. Name and Address of New Registered Agent Name Valdes-Fauli Corporate Services, Inc. Street Address (P.O. Box Number is Not Acceptable) 500 E. Broward Blvd. Suite 1400 City Ft. Lauderdale FL Zip Code 33394	
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>Martin R. Press, Esq., Vice President</u> 3/16/05 <small>Signature, typed or printed name of registered agent and title if applicable.</small> DATE					
9. Capital Contributions as Shown on record. \$500,000.00			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 #	B93000000182		STREET ADDRESS		
NAME	SHOOSTER INV. AS. OF FL		CITY-ST-ZIP		
STREET ADDRESS	2900 W. SAMPLE ROAD			100049167211	
CITY-ST-ZIP	POMPANO BEACH, FL 33073			03/25/05--01005--004 **535.00	
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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>[Signature]</u>			2-25-05 (954)979-4555		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date Daytime Phone #		

Daniel H. Shooster, COO of Shooster Management, Inc. General Partner of

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