2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED Mar 06, 2007 08:00 A Secretary of State

DOCUMENT:	#	A 31	161	16
-----------	---	-------------	-----	----

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



DO NOT WRITE IN THIS SPACE

02282007 No Chg-LP CR2E003 (12/06)

4. FEI Number Applied For 23-2532632 Not Applicable

5. Certificate of Status Desired \$8.75 Additional

6. Name and Address of Current Registered Agent

GY CORPORATE SERVICES INC 500 E BROWARD BLVD SUITE 1400 FT LAUDERDALE, FL 33394

DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or bot the obligations of registered agent.	h, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and little if applicable	DATE
FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00	
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND A NOTE: General Partners MAY NOT be changed on the form; an amendment must be file	

12. GENERAL PARTNER INFORMATION

DOCUMENT / B93000000182

SHOOSTER INV. AS. OF FL

STREET ADDRESS
CITY-ST-ZIP POMPANO BEACH, FL 33073

DOCUMENT / NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT / DOCUMENT

U00000657478 03/14/07-80070-014 500.00

DO NOT WRITE IN THIS SPACE

CITY-ST-ZIP

DOCUMENT #

NAME

STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 trusted empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

DOCUMENT /
NAME
STREET ADDRESS
CITY-ST-ZIP
DOCUMENT /
NAME
STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTINER

DANIEL H. Shooster CEO OF Shooster Management.

3-2-07

954-919-4555

f Hostabiddable