

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

DOCUMENT # A99000001703	
1. Entity Name BIG LOTS PLAZA LIMITED	

Principal Place of Business 666 SHERBROOKE ST. W., #2300 MONTREAL, QUEBEC, CANADA H3A 1E7,	Mailing Address 666 SHERBROOKE ST. W., #2300 MONTREAL, QUEBEC, CANADA H3A 1E7,
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

6. Name and Address of Current Registered Agent	
PERLOFF, JOHN W ESQ. 1177 S.E. 3RD AVENUE FORT LAUDERDALE, FL 33316	

FILED
2004 APR 30 PM 3:01
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



01272004 Chg-LP CR2E003 (10/03)

4. FEI Number 65-0954467	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

7. Name and Address of New Registered Agent	
Name HOSHEDAR, MEHTA	
Street Address (P.O. Box Number is Not Acceptable) 1975 E. SUNRISE BLVD	
#626	
City FT LAUDERDALE FL	Zip Code 33304

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: *H. Mehta* DATE: *1/28/04*
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$850,000.00	10. Amount of Capital Contributions in FLORIDA to date. \$10,000.00
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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 # P99000091192	NAME BIG LOTS PLAZA CORP.	STREET ADDRESS	
STREET ADDRESS 1975 E. SUNRISE BLVD., #626		CITY-ST-ZIP	
CITY-ST-ZIP FORT LAUDERDALE, FL 33304			
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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: *H. H. MEHTA (Authorized representative)* *1/28/04*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE

954-525-2777