

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B93000000182
1. Entity Name
 SHOOSTER INVESTMENT ASSOCIATES OF FLORIDA, LTD.

FILED *nf*
 01 MAR 7 1 AM 9:06
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business 555 E. Baltimore Pike
 Media, PA 19063
Mailing Address 2900 W. Sample Road
 Pompano Beach, FL 33073

2. Principal Place of Business Suite, Apt. #, etc.
3. Mailing Address Suite, Apt. #, etc.
City & State
Zip **Country**

4. FEI Number 23-2535226
Applied For
Not Applicable
5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
 SHOOSTER, HARRY
 c/o FESTIVAL FLEA MARKET, MNGMT OFFICES
 2900 W. SAMPLE ROAD
 POMPANO BEACH, FL 33073
 Please amend zip code

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** **Zip Code** 33073

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.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE** _____

9. Capital Contributions as Shown on record. \$0.00
10. Amount of Capital Contributions in FLORIDA to date. \$0.00
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
DOCUMENT # B00000000394
NAME Hostabiddable Associates, L.P.
STREET ADDRESS 555 E. Baltimore Pike
CITY-ST-ZIP Media, PA 19063

13. ADDRESS CHANGES ONLY
STREET ADDRESS
CITY-ST-ZIP
STREET ADDRESS 0000003803280--1
CITY-ST-ZIP -03/06/01--01119--016
 ****150.00 ****150.00

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: *Harry Shooster*
DATE 2/26/01 **Daytime Phone #** (954) 979-4555
BY: HARRY SHOOSTER CEO OF SHOOSTER MGT. INC. General Partner of Hostabiddable Assoc. L.P.

CR2E003 (11/00)