2002 UNIFORM BUSINESS REPORT (UBR)

FILED
02 MAR -7 AM 9:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000596569 AT

DOCUMENT # B93000000182

1. Entity Name
SHOOSTER INVESTMENT ASSOCIATES OF FLORIDA, LTD.

Principal Place of Business	Mailing Address
555 E. BALTIMORE PIKE MEDIA PA 19063	2900 W. SAMPLE RD. 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

DUE BY MAY 1, 2002

4. FEI Number 23-2535226 — ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SHOOSTER, HARRY % FESTIVAL FLEA MARKET, MANAGEMENT OFFICES 2900 W. SAMPLE ROAD POMPANO BEACH FL 32514	Name: Shooster Management, Inc. Street Address (P.O. Box Number is Not Acceptable): 2900 W. Sample Road City: Pompano Beach 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] Daniel H. Shooster, COO of Shooster Mgt Inc. — DATE 2-16-02
Signature, typed or printed name of registered agent and title if applicable.

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		13. ADDRESS CHANGES ONLY	
DOCUMENT # / NAME / STREET ADDRESS / CITY-ST-ZIP	B00000000394 HOSTABIDDABLE ASSOCIATES, L.P. 555 E. BALTIMORE PIKE, P.O. BOX 349 MEDIA PA 19063-0349	STREET ADDRESS / CITY-ST-ZIP	300005097613--0 -03/12/02--01066--015 ****150.00 ****150.00
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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: [signature] DANIEL H. Shooster — 2-16-02 — (954) 979-4565
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #
COO of Shooster [illegible]

CR2E003 (9/01)

STAPLE CHECK HERE