2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

FILED Mar 05, 2004 08:00 AM Secretary of State

DOCUMENT # B9300000182 1. Entity Name SHOOSTER INVESTMENT ASSOCIATES OF FLORIDA, LTD.			Α,		Secretary of State
Principal Pla	ce of Business	Mailing Address			
	MPLE ROAD BEACH, FL 33073	2900 W. SAMPLE RI POMPANO BEACH, I			
2. Principal Place of Business		3. Mailing Address		· <u>-</u>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02272004 Chg-LP CR2E003 (10/03)
City & State		City & State			4. FEI Number Applied For 23-2535226 Not Applied be
Zip	Country	Zip	Cour	stry	5. Certificate of Status Desired \$8.75 Additional Fee Required
	Name and Address of Current Registered Agent			Name	7. Name and Address of New Registered Agent
SHOOSTER MANAGEMENT, INC. 2900 W. SAMPLE ROAD POMPANO BEACH, FL 33073				Street Address (P.O. Box Number is Not Acceptable)	
				City	FL Zip Code
the obliga	tions of registered agent.				red agent, or both, in the State of Florida, I am familiar with, and accept
9. Capital Contributions as Shown on record. \$0.00 in FLORIDA to d				butions	
	A GENERAL PARTNE	R THAT IS A BUSINESS	ENTITY M	UST BE REGIS	TERED AND ACTIVE WITH THIS OFFICE. If must be filed to change a general partner.
12.	GÉNERAL PARTI	NER INFORMATION	13.	-,	ADDRESS CHANGES ONLY
DOCUMENT # NAME STREET ADDRESS	B00000000394 HOSTABIDDABLE ASSOCIATES, L.P. 2900 W. SAMPLE ROAD			EET ADIORESS	
CITY-ST-ZIP	POMPANO BEACH, FL 3307	3	CITY	-51-3P	
NAME STREET ADDRESS				ET ACDRESS	U00000090421
CITY-ST-ZIP DOCUMENT #			— CHY	-S1-ZIP	
NAME STREET ADDRESS			STR	TET ADDRESS	
CiTY-ST-ZIP			CITY	-ST-ZIP	
DOCUMENT # NAME			STRE	ET ADDRESS	
STREET ADDRESS CITY-ST-ZIP DOCUMENT			CITY	-ST-ZP	
DOCUMENT # NAME			STRE	ET ADDRESS	
NAME STRUET ADDRESS CITY-ST-ZIP			CITY	-\$T-ZIP	
DOCUMENT #			SIRE	ET ADDRESS	
STREET ADDRESS CITY-ST-ZIP			CETY	-ST-ZIP	
14. I hereby indicated the recei	certify that the information supplied of the first that the information supplied in this report is true and accurate a ver or truefeet empowered toget ecute	with this filing does not qualify and that my signature shall ha whis report as fequired by Ch	for the exe we the same apter 620,	mption stated in Se e legal effect as if n Florida Statutes	ection 119.07(3)(I), Florida Statutes. I further certify that the information nade under oath, that I am a General Partner of the limited partnership o