


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

04 MAR 24 PM 2: 36

DOCUMENT # A00000001858	
1. Entity Name RLMAL, LTD.	

Principal Place of Business 2101 CORPORATE BLVD., SUITE 107 BOCA RATON, FL 33431	Mailing Address 2101 CORPORATE BLVD., SUITE 107 BOCA RATON, FL 33431
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2. Principal Place of Business 4510 Buchanan St Suite, Apt. #, etc.	3. Mailing Address 4510 Buchanan St Suite, Apt. #, etc.
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City & State Hollywood FL	City & State Hollywood FL
Zip 33021	Zip 33021



02112004 Chg-LP CR2E003 (10/03)

4. FEI Number 65-1059100	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent GUTTER, MARVIN C ESQ. C/O GUTTER, JOSEPH & RUFFIN 9100 S. DADELAND BLVD., SUITE 901 MIAMI, FL 33156	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$2,500,000.00	10. Amount of Capital Contributions in FLORIDA to date.
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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 # NAME STREET ADDRESS CITY-ST-ZIP	P00000110806 RLMAL, INC. 2101 CORPORATE BLVD., SUITE 107 BOCA RATON, FL 33431	STREET ADDRESS CITY-ST-ZIP	4510 Buchanan St Hollywood, FL 33021
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	100032186081 04/00/04 01014 000 **526.25
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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: *Robert J. Malinen* Date _____ Daytime Phone # _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE