## 2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By September 8, 2004

DOCUMENT # A0100000572  1. Entity Name RIFKIN FAMILY LIMITED PARTNERSHIP							OL JUL 30 PH 2:01 SEUNERS LUI ELINE TALLAHASSEE, FLORIDA			
Principal Place 8515 EGRET WEST PALM E	MEADOW L Beach, FL	ANE 33412	Meiling Address BERNARD M. RIFKIN- APT. 15 3333 HENRY HUDSON PKWY RIVERDALE, NY 10463							
2. Principal P		lades Rd.	3. Mailing Address 6 Myrtle	3. Mailing Address 6 Myrtle Drive						
Suite, Apt.			Suite, Apt. #, etc.			07142004	Chg-LP	CR2E003	(10/03)	
City & State Boca Raton, FL			City & State Great Neck, NY			4. FEI Number 65-10983	325		Applied For Not Applicable	
Zip 3.3	3434	Country U.S.	Zip 11021	Cour		5. Certificate of	Status Desired	Fe Fe	3.75 Additional e Required	
6. Name and Address of Current Registered Agent RIFKIN FAM. INCORPORATED 8515 EGRET MEADOW LANE WEST PALM BEACH, FL 33412					7. Name and Address of New Registered Agent  Name Carl S. Rosen  Street Address (P.O. Box Number is Not Acceptable)  7777 Glades Road  Suite 300  City					
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 the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.										
9. Capital Contributions as Shown on record. \$7,500.00.										
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		13.			ADDRESS CHA			
DOCUMENT # NAME	RIFKIN FAMILY, INC.				7777 Glades Road, Suite 300					
STREET ADDRESS 3333 HENRY HUDSON PKWY, AP CITY-ST-ZIP RIVERDALE, NY 10463			NPT. 155	cm	r-SI-ZIP B	oca Rato	n, FL 3	3434		
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14. I hereby indicated the receives	I on this repo ver or trustee	e information supplied with it is true and accurate and empowered to execute thi	this filing does not qualify that my signature shall hav is report as required by Cha	e the sam apter 620,	ne legal effect as if Florida Statutes	made under oath; t	that I am a Genera	al Partner of th	that the information e limited partnership or	

FILED