

**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By September 14, 2007**

**FILED**  
**Aug 01, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # A01000000572**

1. Entity Name  
**RIFKIN FAMILY LIMITED PARTNERSHIP**



Principal Place of Business  
**7777 GLADES ROAD, SUITE 300**  
**BOCA RATON, FL 33434**

Mailing Address  
**6 MYRTLE DRIVE**  
**GREAT NECK, NY 11021**



07092007 No Chg-LP

CR2E003 (12/06)

4. FEI Number  
**65-1098325**

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**

**ROSEN, CARL S**  
**7777 GLADES ROAD, SUITE 300**  
**BOCA RATON, FL 33434**

**DO NOT WRITE**  
**IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$900.00**  
**On or after September 14, 2007, Fee will be \$1000.00**

**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 INFORMATION**

DOCUMENT # **P01000042333**  
NAME **RIFKIN FAMILY, INC.**  
STREET ADDRESS **7777 GLADES ROAD, SUITE 300**  
CITY-ST-ZIP **BOCA RATON, FL 33434**

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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *X Tony Rifkin*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

*7/16/07* *516 466-0778*  
Date Daytime Phone #

STAPLE CHECK HERE