


**2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004**

FILED

2004 APR 29 PM 3:40

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DOCUMENT # A03000001052
1. Entity Name
MHF MANAGEMENT ASSOCIATES, LLLP



Principal Place of Business
501 BRICKELL KEY DRIVE
SUITE # 103
MIAMI, FL 33131 US

Mailing Address
501 BRICKELL KEY DRIVE
SUITE # 103
MIAMI, FL 33131 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt #, etc.

City & State

Zip Country

6. Name and Address of Current Registered Agent

BERGER, GERARD
501 BRICKELL KEY DRIVE
SUITE # 103
MIAMI, FL 33131

7. Name and Address of New Registered Agent

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 fee if applicable

9. Capital Contributions as Shown on record. \$0.00

10. Amount of Capital Contributions in FLORIDA to date.

**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 #	BERGER, GERARD	STREET ADDRESS	
NAME	501 BRICKELL KEY DRIVE SUITE # 103	CITY-ST-ZIP	
STREET ADDRESS	MIAMI, FL 33131		U00000136075
CITY-ST-ZIP			04723704-80006-005 141.25
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STAPLE CHECK HERE

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: Gerard Berger 4/15/04 305-358-1700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #