


**2008 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2008**

**FILED
Mar 17, 2008 08:00 A
Secretary of State**

DOCUMENT # A93000001169 1. Entity Name KRICKSTEIN PARTNERS LTD.	
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Principal Place of Business 7559 FAIRMONT COURT BOCA RATON FL 33496	Mailing Address 7559 FAIRMONT COURT BOCA RATON FL 33496
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country

1st MOORE CR2E003 (10/07)

4. FEI Number 65-0453192	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 GENE K. GLASSER, ESQ. 100 W. CYPRESS CREEK RD., STE 700 FORT LAUDERDALE FL 33309	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 the date of application

FILE NOW!!! Fee is \$500. * After May 1, 2008, fee will be \$900. *** Make check payable to Florida Department of State.**

**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	KRICKSTEIN, HERBERT I 7559 FAIRMONT COURT BOCA RATON FL 33496	STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	KRICKSTEIN, EVELYN 7559 FAIRMONT COURT BOCA RATON FL 33496	STREET ADDRESS CITY-ST-ZIP	U00000862087 04/03/08-80034-015 500.00
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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 62C, Florida Statutes

SIGNATURE: Herbert Krickstein HERBERT KRICKSTEIN 3/14/08 561-414-3370
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone *

STAPLE CHECK HERE