

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED

04 FEB 12 AM 9:04

SECRETARY OF STATE
TALLAHASSEE FLORIDA

WJW



01072004 Chg-LP CR2E003 (10/03) **2/12**

DOCUMENT # A97000002440

1. Entity Name
RISE SMART DEVELOPMENT, LTD.



Principal Place of Business
**C/O DIETER A. THIEMAN
11380 PROSPERITY FARMS ROAD, #217
PALM BEACH GARDENS, FL 33410**

Mailing Address
**C/O DIETER A. THIEMAN
11380 PROSPERITY FARMS ROAD, #217
PALM BEACH GARDENS, FL 33410**

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number
65-0792168

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**THIEMANN, DIETER
11380 PROSPERITY FARMS ROAD
PALM BEACH GARDENS, FL 33410**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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 _____

9. Capital Contributions as Shown on record. **\$1,155,000.00**

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 #	P97000095772	STREET ADDRESS	RISE SMART DEVELOPMENT INC
NAME	H.F. MALLS INVESTMENT CORPORATION	CITY-ST-ZIP	
STREET ADDRESS	11380 PROSPERITY FARMS ROAD #217	STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410	CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS		STREET ADDRESS	
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**N/C filed
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10/04/03**

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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: *Dieter A. Thieman for Gen'l Pte.* **2/6/04** **561 694 1200**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #