FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

	OMB APPROVAL								
ОМВ	OMB Number: 3235-0104								
Estim	Estimated average burden								
hours	per response	0.5							

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  EIBELER PAUL		2. Date of Even Requiring State (Month/Day/Yea 04/14/2004	ment	3. Issuer Name and Ticker or Trading Symbol TAKE TWO INTERACTIVE SOFTWARE INC [ TTWO ]							
(Last) TAKE-TWO I	(First) NTERACTIVE	(Middle) SOFTWARE,			Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner			(Mo	5. If Amendment, Date of Original Filed (Month/Day/Year)		
622 BROADV	VAY				X	Officer (give title below)  PRESIDENT	Other (spe- below)	, [0.11	licable Line)	/Group Filing (Check y One Reporting Person	
(Street) NEW YORK	NY	10012							Form filed by Reporting P	y More than One erson	
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					ially Owned (Instr. 4)			. Nature of Indirect Beneficial Ownership nstr. 5)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
Expir		2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (In			4. Conversion or Exercise Price of	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiration Date	Title		Amount or Number of Shares	Derivative Security	Direct (D) or Indirect (I) (Instr. 5)		
Rule 16b-3 Sto	ck Option (Righ	nt to Buy)	(1)	04/14/2009		Common Stock	300,000	31.92	D		

## **Explanation of Responses:**

1. Exercisable as to 50,000 shares every six months.

/s/ Paul Eibeler

04/29/2004

\*\* Signature of Reporting Person

Date

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$ 

- \* If the form is filed by more than one reporting person, see Instruction 5 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.