


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Jan 11, 2007 08:00 AM
Secretary of State

DOCUMENT #A00000001785 1. Entity Name LEVIEN 2000 INVESTMENTS, LTD.	
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Principal Place of Business 3100 SOUTH OCEAN BLVD. PALM BEACH, FL 33480	Mailing Address PHILIP LEVIEN 43 DEER PARK ROAD KINGS POINT, NY 11024
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DO NOT WRITE IN THIS SPACE



01042007 No Chg-LP CR2E003 (12/06)

4. FEI Number 65-1064543	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent M & W AGENTS, INC. BOCA CORPORATE CENTER 2101 CORPORATE BLVD., SUITE 107 BOCA RATON, FL 33431	DO NOT WRITE IN THIS SPACE
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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 title if applicable.

FILE NOW!!! FEE IS \$500.00
After May 1, 2007, Fee will be \$900.00

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 #	L00000013532
NAME	LEVIEN 2000 HOLDINGS, L.L.C.
STREET ADDRESS	43 DEER PARK ROAD
CITY-ST-ZIP	KINGS POINT, NY 11024
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
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STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1100000582084
01/11/07-80017-022 500.00

DO NOT WRITE IN THIS SPACE

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:  **1-04-07 576 466-4459**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE