

2008 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2008

DOCUMENT # A00000001785	
1. Entity Name LEVIEN 2000 INVESTMENTS, LTD.	

Principal Place of Business 401 EAST LYNTON BLVD. DELRAY BEACH FL 33483	Mailing Address PHILIP LEVIEN 43 DEER PARK ROAD KINGS POINT, NY 11024
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DO NOT WRITE IN THIS SPACE

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.	100115894951 01/23/08--01032--005 **\$500.00
SIGNATURE _____ Signature, typed or printed name of registered agent, and (if applicable)	DATE _____

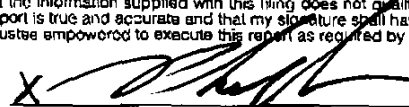
FILE NOW!!! FEE IS \$500.00
After May 1, 2008, Fee will be \$900.00

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 #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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
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SIGNATURE: 	1-16-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	Date Daytime Phone #

FILED
08 JAN 29 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01162008 No Chg-LP CR2E003 (12/06)

4. FEI Number 65-1064543	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

STAPLE CHECK HERE