2008 LIMITED PARTNERSHIP ANNUAL REPORT

FILED

Due By May 1, 2008				May 02, 2008 08:00 Secretary of Stat			
DOCU 1. Entity Nar SVMP, L					Še	ecrétar	y of Stat
Principal Place of Business C/O SVMP, INC. 175 N.E. SPANISH TRAIL BOCA RATON, FL 33432		Mailing Address C/O SVMP, INC. 175 N.E. SPANISH TRAIL BOCA RATON, FL 33432		 			1
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-				4. FEI Number 65-00070	83		Applied For Not Applicable
			•	5. Certificate of	Status Desired		75 Additional Required
	6. Name and Address of Current R	egistered Agent					
MAGID, JUDY 2300 CORPORATE BLVD., N.W. #238				1,30 1/3,400	IW TO		
BOCA RA	TON, FL 33431		St. of the Co.		HIS SP	ACE	
8. The above	e named entity submits this statement for tions of registered agent.	the purpose of changing its registe	red office or register	ed agent, or both,	in the State of Flori	da. I am familia	ar with, and accept
SIGNATURE							
Signature, typed or printed name of registered agent and bite if applicable.				DATE			
	After May 1, 20	III FEE IS \$500.00 108, Fee will be \$900.00					
	NOTE: General Partners MA		AUST BE REGIST n; an amendmen	TERED AND AC It must be filed	TIVE WITH THIS to change a ger	S OFFICE. neral partner	
DOCUMENT /	GENERAL PARTNER M58408	INFORMATION					
NAME	SVMP, INC.	* ·	· · · · · · · · · · · · · · · · · · ·				
STREET ADDRESS	175 NË SPANISH TRAIL BOCA RATON, FL	# 보		, ,	Unnana	143823	
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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 620, Florida Statutes

SIGNATURE:

STAPLE CHECK HERE

DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

April 22, 2008

(561) 395-2228

Daytime Phone #