


**2008 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2008**

**FILED  
Feb 15, 2008 08:00 AM  
Secretary of State**

<b>DOCUMENT # A96000001429</b> 1. Entity Name LVMOR, LTD.	
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Principal Place of Business 1303 N.W. 78 AVE. MIAMI, FL 33126	Mailing Address 338 MINORCA AVENUE CORAL GABLES, FL 33134
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**DO NOT WRITE IN THIS SPACE**



01052008 No Chg-LP CR2E003 (12/06)

4. FEI Number 65-0692533	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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<b>6. Name and Address of Current Registered Agent</b>  QUINTANA, J. LUIS ESQ. 338 MINORCA AVENUE CORAL GABLES, FL 33134
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**DO NOT WRITE  
IN THIS SPACE**

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, 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 #	P96000060050
NAME	FERN MANAGEMENT CORP.
STREET ADDRESS	1303 N.W. 78 AVE.
CITY-ST-ZIP	MIAMI, FL 33126
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000830121  
02/26/08-80070-018 500.00

**DO NOT WRITE  
IN THIS SPACE**

STAPLE CHECK HERE

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:** *Duvald R. Linn* 7/10/08  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #