
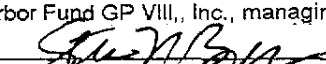


**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

**FILED**  
**May 24, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A98000002467</b> 1. Entity Name LNR HARBOR FUND LIMITED PARTNERSHIP NO. VIII					
Principal Place of Business 1601 WASHINGTON AVE., SUITE 800 MIAMI BEACH, FL 33139			Mailing Address 1601 WASHINGTON AVE., SUITE 800 MIAMI BEACH, FL 33139		
2. Principal Place of Business  Suite, Apt #, etc.			3. Mailing Address  Suite, Apt #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>65-0872920</b>	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent  LNR HARBOR FUND GP VIII, INC. 1601 WASHINGTON AVE., SUITE 800 MIAMI BEACH, FL 33139				7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  City	
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.				FL Zip Code	
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record. <b>\$1,000.00</b>			10. Amount of Capital Contributions in FLORIDA to date.		
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS  CITY-ST-ZIP		
P98000092260 LNR HARBOR FUND GP VIII, INC. 1601 WASHINGTON AVE., SUITE 800 MIAMI BEACH, FL 33139			000000368105 05/24/05-80003-021 141.25		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS  CITY-ST-ZIP		
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.					
LNR Harbor Fund GP VIII, Inc., managing member					
SIGNATURE: <b>BY</b> 			Steven N. Bjerke		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date <b>4/6/05</b> Daytime Phone # <b>(305) 695-5500</b>		

STAPLE CHECK HERE