2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Apr 25, 2008 08:00 AM
Secretary of State

DOCUMENT # B00000000003

1. Entity Name
U.S. RETAIL INCOME FUND VII, LIMITED PARTNERSHIP

Principal Place of Business	Mailing Address
400 INTERSTATE NORTH PARKWAY SUITE 700 ATLANTA, GA 30339	400 INTERSTATE NORTH PARKWAY SUITE 700 ATLANTA, GA 30339

04022008 No Chg-LP CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
58-2484031
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

NATIONAL CORPORATE RESEARCH, LTD.
515 E. PARK AVE.
TALLAHASSEE, FL 32301

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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, 2008, Fee will be $900.00

000000921281
05/14/08-80077-019 500.00

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 #	F01000003501
NAME	BVT INSTITUTIONAL INVESTMENTS, INC.
STREET ADDRESS	400 INTERSTATE NORTH PKWY, STE 700
CITY-ST-ZIP	ATLANTA, GA 30339
DOCUMENT #	F94000005616
NAME	VUWB INVESTMENTS, INC.
STREET ADDRESS	575 FIFTH AVENUE, 17TH FLOOR
CITY-ST-ZIP	NEW YORK, NY 10017
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	

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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: Kip R. Mueller 4/22/08 770-618-3500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #