

**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2007**

DOCUMENT # B05000000324

1. Entity Name  
LIEW INVESTMENTS, L.P.



Principal Place of Business  
9889 BLACKGOLD ROAD  
LA JOLLA, CA 92037

Mailing Address  
9889 BLACKGOLD ROAD  
LA JOLLA, CA 92037

FILED

2007 MAR 22 AM 11:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**DO NOT WRITE IN THIS SPACE**

03032007 No Chg-LP

CR2E003 (12/06)

4. FEI Number

47-0896141

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

WOOD, RICHARD A ESQ.  
1395 BRICKELL AVENUE, 14TH FLOOR  
MIAMI, FL 33131

**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

Signature, typed or printed name of registered agent and title if applicable.

DATE

**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2007, 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 # F05000004258  
NAME FPH CAPITAL, INC.  
STREET ADDRESS 9889 BLACKGOLD ROAD  
CITY-ST-ZIP LA JOLLA, CA 92037

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

500095291715  
03/29/07--01038--012 \*\*508.75

**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

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/8/07

Date

858 546 8088

Daytime Phone #