## JAN 16 2009

FORM D

**Notice of Exempt Offering of Securities** 

# <sup>Washington,</sup> ⊅C U.S. Securities and Exchange Ĉômmission

Washington, DC 20549

(See instructions beginning on page 5)

Intentional misstatements or omissions of fact constitute federal criminal violations. See 18 U.S.C. 1001.

OMB Number: 3235-0076 Expires: November 30, 2008 Estimated average burden

hours per response: 4.00

tem 1. Issuer's Identity				
Name of Issuer	Pre	vious Name(s)		Entity Type (Select one)
QVR Capital 2, LLC			<u> </u>	Corporation
Jurisdiction of Incorporation/Organizat	ion	B	ROCESSED	Limited Partnership
California			ROCESSEL	Limited Liability Company
			JAN 2 8 2009	General Partnership  Business Trust
Year of Incorporation/Organization		5311		
(Select one) Over Five Years Ago Within Last F	ive Years		MSOMREUTER	5 Siller (Specify)
(specify		3		
(If more than one issuer is filing this notic	e, check this b	ox 🔲 and identify	additional issuer(s) by	attaching Items 1 and 2 Continuation Page(s).
tem 2. Principal Place of Busine				
Street Address 1		<del></del>	Street Address 2	
2020 Main Street, Suite 500				
City	State/Pr	ovince/Country	ZIP/Postal Code	Phone No.
	Californ	<del></del>		714-421-4199
Irvine	Californ	ııa	92614	/ 14-421-4 199
tem 3. Related Persons				
Last Name		First Name		Middle Name
Kramer		Kathleen	<u> </u>	
Street Address 1			Street Address 2	(100))) FERR 100) FERR 100)
5911 Heil Avenue, Suite B				
City	State/Pro	vince/Country	ZIP/Postal Code	
Huntington Beach	Californi	a	92649	09002275
	J	Dramatar	L	
Relationship(s): Executive Office				
Clarification of Response (if Necessary)	Managing N	lember of Canyo	onland Investors, LLC,	its Manager
(Ic	lentify additio	nal related person	s by checking this box 🛭	and attaching Item 3 Continuation Page(s)
tem 4. Industry Group (Sele	ct one)			
○ Agriculture		<u> </u>	Services	Construction
Banking and Financial Service Commercial Banking	es	Energy	ric Utilities	REITS & Finance
Commercial Banking Insurance		$\simeq$ -	gy Conservation	Residential
Investing		$\sim$	Mining	<ul> <li>Other Real Estate</li> </ul>
Investment Banking			onmental Services	Retailing
Pooled Investment Fund		Oil &		Restaurants
If selecting this industry group, also	select one func	$\sim$ $\sim$	r Energy	Technology
type below and answer the questio			•	Computers
○ Hedge Fund		Health C	are echnology	Telecommunications
Private Equity Fund			th Insurance	Other Technology
Venture Capital Fund		Ų	itals & Physcians	Travel
Other Investment Fund		<u> </u>	maceuticals	Airlines & Airports
Is the issuer registered as an i			r Health Care	Lodging & Conventions
company under the Investme Act of 1940? Yes	nt Company No	○ Manufac		Tourism & Travel Services
9 9		Real Esta	<del>-</del>	Other Travel
Other Banking & Financial Service	•	_	mercial	Other

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Item 5. Issuer Size (Select one)		
Revenue Range (for issuer not specifying "hedge" or "other investment" fund in Item 4 above)	SĮ I+	ggregate Net Asset Value Range (for issuer pecifying "hedge" or "other investment" fund in em 4 above)
O No Revenues	OR "	No Aggregate Net Asset Value
\$1 - \$1,000,000		S1 - \$5,000,000
\$1,000,001 - \$5,000,000		\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000		\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000		\$50,000,001 - \$100,000,000
Over \$100,000,000		Over \$100,000,000
<ul> <li>Decline to Disclose</li> </ul>		O Decline to Disclose
O Not Applicable		Not Applicable
Item 6. Federal Exemptions and Exclusions Cla	imed (Select	all that apply)
In	vestment Compan	y Act Section 3(c)
Rule 504(b)(1) (not (i), (ii) or (iii))	Section 3(c)(1)	<del>_</del>
Rule 504(b)(1)(i)	Section 3(c)(2)	Section 3(c)(10)
Rule 504(b)(1)(ii)	Section 3(c)(3)	Section 3(c)(11)
Rule 504(b)(1)(iii)	Section 3(c)(4)	Section 3(c)(12)
<b>⋉</b> Rule 505	Section 3(c)(5)	Section 3(c)(13)
Rule 506	Section 3(c)(6)	Section 3(c)(14)
Securities Act Section 4(6)	Section 3(c)(7)	
Item 7. Type of Filing		
New Notice OR	it	
Date of First Sale in this Offering: 01/09/2008		st Sale Yet to Occur
01/03/2000	On 🗆	,
Item 8. Duration of Offering		
Does the issuer intend this offering to last more than	one year?	Yes No
Item 9. Type(s) of Securities Offered (Select	all that apply)	
⊠ Equity	Pooled Inv	estment Fund Interests
☐ Debt	_	Common Securities
Option, Warrant or Other Right to Acquire		operty Securities
Another Security	Other (Des	cribe)
Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security		
Item 10. Business Combination Transaction		
Is this offering being made in connection with a busin transaction, such as a merger, acquisition or exchange offe		☐ Yes ☒ No
Clarification of Response (if Necessary)	••	
	<del></del>	

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tem 11. Minimum Investment				
Minimum investment accepted from an	y outside investor \$	10,000.00		
tem 12. Sales Compensation				
ecipient		Recipient CRD Number		
				☐ No CRD Number
Associated) Broker or Dealer	None	(Associated) Broker or Dea	aler CRD Nu	mber
			<del>-</del>	☐ No CRD Number
Street Address 1		Street Address 2		
City	State/Province	/Country ZIP/Postal Coo	de	
States of Solicitation All States AL AK AZ AR IL IN IN KS MT NE NV NH RI SC SD TN (Identify additional perso		CT DE DC  ME MD MA  NY NC ND  VT VA WA  tion by checking this box	FL MI OH WV and attach	GA HI ID  MN MS MO  OK OR PA  WI WY PR  hing Item 12 Continuation Page(s
			]	
(a) Total Offering Amount	\$ 900,000.00		OR	X Indefinite
(b) Total Amount Sold	\$ 850,000.00			
(c) Total Remaining to be Sold (Subtract (a) from (b)) Clarification of Response (if Necessary)	\$ 0.00		OR	☐ Indefinite
Offer term/round of equity has close	d.			
Item 14. Investors				
Check this box if securities in the offernumber of such non-accredited investor	rs who already have invest	ed in the offering:	qualify as a	ccredited investors, and enter the
Item 15. Sales Commissions ar	nd Finders' Fees Ex	rpenses		
Provide separately the amounts of sales check the box next to the amount.	commissions and finders'	fees expenses, if any. If an a	mount is no	ot known, provide an estimate ar
		Sales Commissions \$ 0		Estimate
Clarification of Response (if Necessary)		Finders' Fees \$ 0		Estimate

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number.

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Item 16. Use of Proceeds	
Provide the amount of the gross proceeds of the offering that has been or is pused for payments to any of the persons required to be named as exedirectors or promoters in response to Item 3 above. If the amount is unknown estimate and check the box next to the amount.	cutive officers, \$ 173,000.00
Clarification of Response (if Necessary)	
Acquisition fee paid to managers of issuer	
Signature and Submission	
Please verify the information you have entered and review the Ter	rms of Submission below before signing and submitting this notice.
Terms of Submission. In Submitting this notice, each iden	ntified issuer is:
the State in which the issuer maintains its principal place of busing process, and agreeing that these persons may accept service on such service may be made by registered or certified mail, in any lagainst the issuer in any place subject to the jurisdiction of the U activity in connection with the offering of securities that is the suprovisions of: (i) the Securities Act of 1933, the Securities Exchan Company Act of 1940, or the Investment Advisers Act of 1940, or State in which the issuer maintains its principal place of business Certifying that, if the issuer is claiming a Rule 505 exempting the reasons stated in Rule 505(b)(2)(iii).  * This undertaking does not affect any limits Section 102(a) of the Nation 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require "covered securities" for purposes of NSMIA, whether in all instances or described in the securities in the securities of the securities of the securities in the securiti	and the Securities Administrator or other legally designated officer of these and any State in which this notice is filed, as its agents for service of lits behalf, of any notice, process or pleading, and further agreeing that Federal or state action, administrative proceeding, or arbitration brought united States, if the action, proceeding or arbitration (a) arises out of any abject of this notice, and (b) is founded, directly or indirectly, upon the ge Act of 1934, the Trust Indenture Act of 1939, the Investment any rule or regulation under any of these statutes; or (ii) the laws of the sor any State in which this notice is filed.  Inption, the issuer is not disqualified from relying on Rule 505 for one of the laws of the securities Markets Improvement Act of 1996 ("NSMIA") (Pub. L. No. 104-290, Information. As a result, if the securities that are the subject of this Form D are ue to the nature of the offering that is the subject of this Form D, States cannot
routinely require offering materials under this undertaking or otherwise so under NSMIA's preservation of their anti-fraud authority.	and can require offering materials only to the extent NSMIA permits them to do
Each identified issuer has read this notice, knows the contents to undersigned duly authorized person. (Check this box and a in Item 1 above but not represented by signer below.)	be true, and has duly caused this notice to be signed on its behalf by the ttach Signature Continuation Pages for signatures of issuers identified
Issuer(s)	Name of Signer
QVR Capital 2, LLC	Natasha Zaharov
Signature	Title
natasha zaharov	Attorney, Panattoni Law Firm
Number of continuation pages attached:    1	Date  11 4 2008  form are not required to respond unless the form displays a currently valid OMB

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#### **Item 3 Continuation Page**

ast Name	First Name	Middle Nar	ne
Corral	Forrest		
treet Address 1		Street Address 2	
020 Main Street, Suite 500			<u></u> .
ity	State/Province/Country	ZIP/Postal Code	
vine	California	92614	
elationship(s): Executive (	Officer 🛛 Director 🔲 Promoter		
larification of Response (if Necess	sary) Managing Member of FRCM	Investments, LLC, its Manager	
Last Name	First Name	Middle N	ame
Swift	Roger		
Street Address 1		Street Address 2	
2020 Main Street, Suite 500			
ity	State/Province/Country	ZIP/Postal Code	
vine	California	92614	
VIIIC			
· <u> </u>	Officer 🔯 Director 🔲 Promoter  isary) Managing Member of FRCM		
Clarification of Response (if Neces		I Investments, LLC, its Manager ————————————————————————————————————	 ame
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Clarification of Response (if Neces	Managing Member of FRCM	Middle N	ame
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Last Name  Clarification of Response (if Neces  City  Clarification of Response (if Neces  Clarification of Response (if Neces  Last Name	State/Province/Country  Officer Director Promoter ssary)	Street Address 2  ZIP/Postal Code  Middle N	
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