


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

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # A04000000031
1. Entity Name
1570 MADRUGA AVE, LTD.



Principal Place of Business
3211 PONCE DE LEON BLVD.
SUITE 202
CORAL GABLES, FL 33134

Mailing Address
PO BOX 331056
COCONUT GROVE, FL 33233

DO NOT WRITE IN THIS SPACE



01282008 No Chg-LP CR2E003 (12/06)

4. FEI Number 56-2431097	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MARTINI, GREGORY T
2655 LE JEUNE ROAD, STE. 1101
CORAL GABLES, FL 33134

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

**FILE NOW!!! FEE IS \$500.00
After May 1, 2008, Fee will be \$900.00**

05/21/08-80130-003 1288.75

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 #	L03000010002
NAME	ACREI, LLC
STREET ADDRESS	107 SARTO AVE.
CITY-ST-ZIP	CORAL GABLES, FL 33134
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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:  **Constantine J. Scurtis** 2/19/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #