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Annual Report
Filed 12-29-86

2 pgs.

DUE DATE ON OR BEFORE JANUARY 1, 1987

**LIMITED PARTNERSHIP
ANNUAL REPORT
1987**



FLORIDA DEPARTMENT OF STATE
George Fossone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Read Instructions on Other Side Before Making Entries
Filing Fee Required -- Make Checks Payable To: Secretary of State

1 Name and Mailing Address of Limited Partnership		2 Enter change of Address of Limited Partnership	
A19813 I.R.E. REAL ESTATE INCOME FUND, LTD. 1320 SOUTH DIXIE HIGHWAY CORAL GABLES, FL 33146		Mailing Address Principal Street Address 01/09/87 06626 334 City LIMITED PARTNERSHIP REGISTERED AGENT LTD PARTNERSHIP State TOTAL 250.00	

3 Date Registered To Do Business in Florida 04/30/1985	4 State or Country of Formation FLORIDA	For Office Use Only
5 Amount of Capital Contributions \$ 28,105,500.00	CAPITAL CONTRIBUTION IS DEFINED AS THE LIMITED PARTNERS CONTRIBUTIONS ONLY AS ORIGINALLY FILED OR LAST AMENDED WITH THIS OFFICE	Document Number Updater Updater Verifier Acknowledgment W.P. Verifier Filing Fee

6a Name and Business Address of each General Partner	Address of Each General Partner(s) (Do NOT Use Post Office Box Numbers)	City and State
I.R.E. INCOME ADVISORS LEVAN, ALAN B. GRIECO, FRANK V. PERLSTEIN, SUSAN C.	1320 S. DIXIE HIGHWAY 1320 S. DIXIE HIGHWAY 1320 S. DIXIE HIGHWAY 1320 S. DIXIE HIGHWAY	CORAL GABLES, FL CORAL GABLES, FL CORAL GABLES, FL CORAL GABLES, FL

Note: General Partners MAY NOT be changed on this form; an Amendment must be filed to change a General Partner

REGISTERED AGENT INFORMATION

7 Name and Address of Registered Agent	
Name ALAN B. LEVAN	
Street Address (Do NOT Use P.O. Box Number) 1320 South Dixie Hwy., Third Floor	
City and State Coral Gables, Florida	Zip Code 33146
I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620 F.S.	
7a SIGNATURE (Registered Agent Accepting Appointment)	DATE 12/15/86
EFFECTIVE JANUARY 1, 1987, A REGISTERED AGENT AND AN ADDITIONAL FEE OF \$3 IS REQUIRED	
8. IMPORTANT: THIS SECTION MUST BE COMPLETED Has this limited partnership amended its certificate to reflect an increase in the capital contributions since the last annual report?	8a. IMPORTANT: THIS SECTION MUST BE COMPLETED Have all amendments been filed with this office? (Note: If answer is NO, this report cannot be processed until the amendments have been filed.)
Signature X	Date 12/15/86
Typed Name of Signing General Partner ALAN B. LEVAN	Title President
Telephone Number (305) 665-8100	

STATE OF Florida COUNTY OF Dade

BEFORE ME, this day personally appeared ALAN B. LEVAN who being sworn deposes and says that the statements contained in the foregoing Annual Report are true and correct.

SWORN TO AND SUBSCRIBED before me this 15th day of December, 1986.
Notary Public, State of Florida at Large
My Commission Expires July 29, 1990
Jane M. Conway
Notary Public
006114