2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DOCUMENT # A23563

1. Entity Name

TIFFANY 3/8 ASSOCIATES, LTD.

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SECRETARY OF STATE

TALLAHASSEE, FLORIDA

Principal Place of Business 804 OCEAN DRIVE 2ND FLOOR

MIAMI BEACH, FL 33139

Mailing Address 804 OCEAN DRIVE 2ND FLOOR MIAMI BEACH, FL 33139

DO NOT WRITE IN THIS SPACE

01082008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 58-1735389

Applied For Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MARLO COURTNEY 804 OCEAN DRIVE 2ND FLOOR MIAMI BEACH, FL 33139

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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 the obligations of registered agent.	. I am familiar with, and accept
SIGNATURE Signature, typed or printed name or registered agent and title if applicable.	DATE

FILE NOW!!! FEE IS \$500.00 After May 1, 2008, 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.

GENERAL PARTNER INFORMATION 12. DOCUMENT # M41151 PARK TIFFANY, INC. NAME STREET ADDRESS 804 OCEAN DRIVE, 2ND FLOOR CITY-ST-ZIP MIAMI BEACH, FL 33139 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME 4 STREET, AUDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS CITY-ST-ZIP

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DO NOT WRITE
IN THIS SPACE

14. I hereby certify that the information surplied with this filling 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 addurate 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 empowers to execute the report as required by Chapter 620, Florida Statutes

SIGNATURE:

DOCUMENT #
NAME
STREET ADDRESS

NATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #