## 2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

## **DOCUMENT # A00000000380**

1. Entity Name EWE WAREHOUSE INVESTMENTS VII, LTD.



2004 FEB 23 AM 11: 10 DIVIJION OF CORPORATIONS TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 10165 N.W. 19TH STREET 10165 N.W. 19TH STREET MIAMI, FL 33172 MIAMI, FL 33172 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01262004 Chg-LP CR2E003 (10/03) City & State City & State 4. FEI Number Applied For 65-1030323 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **EDWARD W. EASTON** Street Address (P.O. Box Number is Not Acceptable) 10165 N.W. 19TH STREET MIAMI, FL 33172 City Zip Code 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, lyped or printed name of registered agent and little if applicable. DATE 9. Capital Contributions 10. Amount of Capital Contributions \$10,000.00 as Shown on record. in FLORIDA to date. 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. ADDRESS CHANGES ONLY P00000019689 DOCUMENT # STREET ADDRESS EWE WAREHOUSE INVESTMENTS VII, INC. NAME STREET ADDRESS 10165 N.W. 19TH STREET CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33172 **700030116927** /03/04--01048--030 \*\*167.50 DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-SJ-ZIP DOCUMENT # STREET ADDRESS NAME,

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 executably report as required by Chapter 620, Florida Statutes

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

TY-ST-ZIP

EDWARD W. EASTON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

2/20/04/

(305) 593.222