2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

FILED Apr 30, 2008 08:00 AM Secretary of State

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1. Entity Name

EWE WAREHOUSE INVESTMENTS IX, LTD.



Principal Place of Business

10165 N.W. 19TH STREET MIAMI, FL 33172

Mailing Address

10165 N.W. 19TH STREET MIAMI, FL 33172



DO NOT WRITE IN THIS SPACE

01242008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-1107765

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EASTON, EDWARD W 10165 NW 19 ST. MIAMI, FL 33172

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 Signature, typed or printed name of registered agent and tritle 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.							
12.	GENERAL PARTNER INFORMATION						
DOCUMENT # NAME SIRLET ADDRESS CITY-ST-ZIP	L01000007849 EWE WAREHOUSE INVESTMENTS IX, LLC 10165 N.W. 19TH STREET MIAMI, FL 33172	UQQQQQ937314 Q5/27/08~80045-Q1Q 500.QQ					
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP							
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE					
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE					
DOCUMENT # NAME STREET ADDRESS CHY-ST-ZIP							
DOCUMENT # NAME SIRELI ADDRESS CITY-S1-ZIP		the exemptions contained in Chapter 119. Florida Statutos I further certify that the information					

4. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

APR 7

*305:593-222*2
