


**2005 LIMITED PARTNERSHIP ANNUAL REPC
Due By May 1, 2005**

**FILED
Apr 22, 2005 8:00 am
Secretary of State**

DOCUMENT # A0100000754
1. Entity Name
EWE WAREHOUSE INVESTMENTS XIV, LTD.



Principal Place of Business
10165 N.W. 19TH STREET
MIAMI, FL 33172

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

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip Country

City & State
Zip Country



03222005 Chg-LP CR2E003 (10/03)

4. FEI Number
65-1109867

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

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

9. Capital Contributions as Shown on record. **\$10,000.00**

10. Amount of Capital Contributions 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.**

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	L01000008726	STREET ADDRESS	
NAME	EWE WAREHOUSE INVESTMENTS XIV, LLC	CITY-ST-ZIP	
STREET ADDRESS	10165 N.W. 19TH STREET		
CITY-ST-ZIP	MIAMI, FL 33172		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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STREET ADDRESS			
CITY-ST-ZIP			

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05/18/05 01098 005 **167.50**

STAPLE CHECK HERE

14. 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 execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: Edward W. Easton *Edward W. Easton* **305-593-2222** **03/23/05**

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