


FILED

Apr 22, 2005 8:00 am  
Secretary of State

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

<b>DOCUMENT # A0100000768</b> 1. Entity Name EWE WAREHOUSE INVESTMENTS XI, LTD.	
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Principal Place of Business 10165 N.W. 19TH STREET MIAMI, FL 33172	Mailing Address 10165 N.W. 19TH STREET MIAMI, FL 33172
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country

03222005 Chg-LP CR2E003 (10/03)

4. FEI Number 65-1109864	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

<b>6. Name and Address of Current Registered Agent</b> EASTON, EDWARD W 10165 N.W. 19TH STREET MIAMI, FL 33172	<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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.
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**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 # NAME STREET ADDRESS CITY-ST-ZIP	L01000008956 EWE WAREHOUSE INVESTMENTS XI, LLC 10165 N.W. 19TH STREET MIAMI, FL 33172	STREET ADDRESS CITY-ST-ZIP	
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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**  **305-593-2222** **Mch/23/05**

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