


**2007 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2007**

**FILED  
Apr 26, 2007 08:00 AM  
Secretary of State**

|  |   |
|--|---|
| <b>DOCUMENT # A01000001532</b><br>1. Entity Name<br>EWE WAREHOUSE INVESTMENTS XV, LTD. |  |
|--|---|

|  |  |
|--|--|
| Principal Place of Business<br>10165 N.W. 19TH STREET<br>MIAMI, FL 33172 | Mailing Address<br>10165 N.W. 19TH STREET<br>MIAMI, FL 33172 |
|--|--|



04052007 No Chg-LP CR2E003 (12/06)

|   |                                       |
|---|---------------------------------------|
| 4. FEI Number<br>65-1156778                               | Applied For<br>Not Applicable         |
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$8.75</b> Additional Fee Required |

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

EASTON, EDWARD W  
10165 N.W. 19TH STREET  
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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$500.00  
After May 1, 2007, 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.**

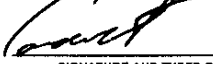
| 12. GENERAL PARTNER INFORMATION |                                      |
|---------------------------------|--------------------------------------|
| DOCUMENT #                      | L01000019951                         |
| NAME                            | EWE WAREHOUSE INVESTMENTS XV, L.L.C. |
| STREET ADDRESS                  | 10165 N.W. 19TH STREET               |
| CITY-ST-ZIP                     | MIAMI, FL 33172                      |
| DOCUMENT #                      |                                      |
| NAME                            |                                      |
| STREET ADDRESS                  |                                      |
| CITY-ST-ZIP                     |                                      |
| DOCUMENT #                      |                                      |
| NAME                            |                                      |
| STREET ADDRESS                  |                                      |
| CITY-ST-ZIP                     |                                      |
| DOCUMENT #                      |                                      |
| NAME                            |                                      |
| STREET ADDRESS                  |                                      |
| CITY-ST-ZIP                     |                                      |

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05/10/07-80061-012 500.00

**DO NOT WRITE IN THIS SPACE**

STAPLE CHECK HERE

14. 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:  Edward W. Easton 4/9/07 (305) 593-2222  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #