2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

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

N. N. J. IIVIE IVI 4 M. DOUNNAAA 1 1	# A06000001115	IT #	JEN	ijΝ	CI	C	۱
--	----------------	------	------------	-----	----	---	---

1. Entity Name

EWE WAREHOUSE INVESTMENTS XIX, 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 20-5604555

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EASTON, EDWARD J 10165 N.W. 19TH STREET MIAMI, FL 33172

SIGNATURE:

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the purpose of changing its resions of registered agent.	gistered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	DATE
,,,,, b	only around, typico or private risans or registerize agont and title it apprecates	UATE
	FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.	00
	A GENERAL PARTNER THAT IS A BUSINESS ENT NOTE: General Partners MAY NOT be changed on the	TY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. form; an amendment must be filed to change a general partner.
12.	GENERAL PARTNER INFORMATION	
DOCUMENT /	L06000092886	
NAME	EWE WAREHOUSE INVESTMENTS XIX, LLC	
STREET ADDRESS	10165 N.W. 19TH STREET	
CITY-ST-ZIP	MIAMI, FL 33172	<u>U00000937287</u>
DOCUMENT #		05/27/08-80045-002 500.00
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
DOCUMENT #		
NAME		
STREET ADDRESS		DO NOT WRITE
CITY-ST-ZIP		
DOCUMENT #		IN THIS SPACE
NAME		,
STREET ADDRESS		
CITY-ST-ZIP		
DOCUMENT /		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
DOCUMENT #		1
NAME		
STREET ADDRESS		

14. I hereby certify that the information supplied with this filling 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 employered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Edward S. Easton