

# 2000 UNIFORM BUSINESS REPORT (UBR)

#209

**DOCUMENT # A95000001386**

1. Entity Name  
**EWE WAREHOUSE INVESTMENTS, LTD.**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 MAY 25 PM 1:33  
MAY 22 2000

Principal Place of Business: C/O EDWARD W. EASTON, 300 GRECO AVENUE, CORAL GABLES FL 33146

Mailing Address: C/O EDWARD W. EASTON, 300 GRECO AVENUE, CORAL GABLES FL 33146-1811



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: **10165 NW 19 Street**  
Suite, Apt. #, etc.

3. Mailing Address: **10165 NW 19 Street**  
Suite, Apt. #, etc.

City & State: **Miami, Florida**

City & State: **Miami, Florida**

Zip: **33172** Country: [Blank]

Zip: **33172** Country: [Blank]

4. FEI Number: **65-0720262**

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**  
**300 GRECO AVENUE**  
**CORAL GABLES FL 33146**

7. Name and Address of New Registered Agent

Name: **EASTON, EDWARD W.**

Street Address (P.O. Box Number is Not Acceptable): **10165 NW 19 Street**

City: **MIAMI** State: **FL** Zip Code: **33172**

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.

SIGNATURE: *[Signature]* **Edward W. Easton** DATE: **04-07-2000**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

10. Amount of Capital Contributions in FLORIDA to date: [Blank]

11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

**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 STREET ADDRESS CITY - ST - ZIP	<b>P95000071573</b> <b>EWE WAREHOUSE INVESTMENTS, INC.</b> <b>300 GRECO AVENUE</b> <b>CORAL GABLES FL 33146</b>
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	[Blank]
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	[Blank]
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	[Blank]
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	[Blank]
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	[Blank]

13. ADDRESS CHANGES ONLY	
STREET ADDRESS CITY - ST - ZIP	<b>10165 NW 19 STREET</b> <b>MIAMI, FLORIDA 33172</b>
STREET ADDRESS CITY - ST - ZIP	<b>100003299561--4</b> <b>-06/21/00--01092--011</b> <b>****158.75 ****158.75</b>
STREET ADDRESS CITY - ST - ZIP	[Blank]
STREET ADDRESS CITY - ST - ZIP	[Blank]
STREET ADDRESS CITY - ST - ZIP	[Blank]
STREET ADDRESS CITY - ST - ZIP	[Blank]

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: *[Signature]* **Edward W. Easton** DATE: **4/7/2000** (305) 593-2222

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

OFFICIAL COPY