2001 IINIEO	irm Riisin	IESS REPORT	/HRR)
LVU II VIII I V	TITL DUCIN	ILOU METUM	(VDIII)

DOCUMENT # A9500001386		<b></b> '	<u> </u>	FILE	D			
EWE WAREHOUSE INVESTMENTS, LTD.			01	APR 30	AN 11: 25			
Principal Place 10165 NW 19 MIAMI FL 3317			Mailing Address 10165 NW 19 STREET MIAMI FL 33172		SE. ȚAI	CRETARY OLAHASSEE		ORADI FATOR IKKU 1810 OKK 1705
Principal Place of Business     3. Mailing Address				-				
Suite, Apt. #, etc. Suite, Apt. #, etc.			<del></del>	DO NOT WRITE IN THIS SPACE				
City & State City & State		City & State	AF A700000			Applied For Not Applicable		
Zip	, .,	ountry	Zip	Cour	ntry	5. Certificate	of Status Desired	\$8.75 Additional Fee Required
	6. Name and	Address of Current R	egistered Agent		Neers	7. Name and	Address of New Registered	Agent
EACTON	EDWARD W			Name				
	edward W 19 Street				Street Address (P.O. Box Number is Not Acceptable)			
MIAMI FL 33172								
					City		F	Zip Code
8. The above	named entity sub	omits this statement for	the purpose of changing it:	register	Led office or registe	red agent, or both	h, in the State of Florida.	
SIGNATURE .	Signature typed or prin	nted name of registered agent an	d title if anoticable (NO)	Begistere	d Agent signature required	d when reinstating)	DATE	
9. Capital Contributions as Shown on record. \$10,000.00		al Contrí	<del></del>		11. MAKE CHECK PAYABI SEE REVERSE SIDE F	E TO DEPT. OF STATE		
	A GEN	ERAL PARTNER TH	IAT IS A BUSINESS EN	TITY M	UST BE REGIS	TERED AND A	CTIVE WITH THIS OFFIC	E
12.	NOTE: Ge	neral Partners MAY GENERAL PARTNER		e form	i; an amendmer	nt must be tiled	d to change a general pa ADDRESS CHANGES O	
DOCUMENT #	P95000071573	4-		STRE	EET ADDRESS			70 -0
NAME	EWE WAREHOUSE INVESTMENTS, INC.		31110	LEI ADDIICGO		<u> </u>	-70.00	
STREET ADDRESS   CITY-ST-ZIP	16165 NW 19 MIAMI FL 3317			CITY	-ST-ZÎP '		Alm.	-88.75
DOCUMENT #	1112 2111 1 2 00 1			STRE	EET ADDRESS			
NAME STREET ADDRESS				CITY	CT 710			
CITY-ST-ZIP			UII T	-ST-ZIP				
DOCUMENT # NAME	NA N		STRE	EET ADDRESS		00004220	01202	
STREET ADDRESS		ş. <sup>6</sup>		CITY	-ST-ZIP	<del> </del>	00004220 -05/16/01	01078007
CITY-ST-ZIP			<del></del>				****158. <i>(</i> 5	****158:75
,DOCUMENT # NAME				STRE	EET ADDRESS			
STREET ADDRESS				CITY	-ST-ZIP			
CITY-ST-ZIP  DOCUMENT #	<del> ,</del>	<u> </u>						
NAME				STRE	ET ADDRESS			
STREET ADORESS CITY-ST-ZIP				CITY	-ST-ZIP			
DOCUMENT #					TT ADDDESS		п	
NAME,				STRE	ET ADDRESS			
STREET ADORESS (				CITY	-ST-ZIP			
14. I hereby of indicated the receiv	ertify that the info on this report is t er or trustee emp	ormation supplied with the rue and accurate and the owered to execute this	nis filing does not qualify for lat my signature shall have report as required by Chap	the exe he same er 620, l	mption stated in Se e legal effect as if n Florida Statutes	ection 119.07(3)(i nade under oath;	), Florida Statutes. I further co that I am a General Partner o	ertify that the information of the limited partnership or

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENER IL PARTNER SIGNATURE: .

03/20/2001 Date

(305)593-2222

Daytime Phone #