

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

#209
 FILED

2004 FEB 23 PM 12: 27

DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA



DOCUMENT # A95000001386					
1. Entity Name EWE WAREHOUSE INVESTMENTS, LTD.					
Principal Place of Business 10165 NW 19 STREET MIAMI, FL 33172			Mailing Address 10165 NW 19 STREET MIAMI, FL 33172		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0720262	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent EASTON, EDWARD W 10165 NW 19 STREET MIAMI, FL 33172			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE _____	
9. Capital Contributions as Shown on record. \$10,000.00		10. Amount of Capital Contributions in FLORIDA to date.			

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.

STAPLE CHECK HERE

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P95000071573	STREET ADDRESS	
NAME	EWE WAREHOUSE INVESTMENTS, INC.	CITY-ST-ZIP	
STREET ADDRESS	10165 NW 19 STREET		
CITY-ST-ZIP	MIAMI, FL 33172		
DOCUMENT #		STREET ADDRESS	400030116874
NAME		CITY-ST-ZIP	03/09/04--01048--029 **167.50
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STREET ADDRESS			
CITY-ST-ZIP			

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 **EDWARD W. EASTON** 2/20/04 (305) 593-2222
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #