

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A98000002667

1. Entity Name  
EWE WAREHOUSE INVESTMENTS IV, LTD.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 JUN 13 PM 1:33

Principal Place of Business  
3069 TAFT STREET  
HOLLYWOOD, FL 33021

Mailing Address  
3069 TAFT STREET  
HOLLYWOOD, FL 33021



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

APPLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

REGISTRATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

Name  
MEWDELSON VICTOR H  
Street Address (P.O. Box Number is Not Acceptable)  
3069 TAFT STREET  
City HOLLYWOOD FL Zip Code 33021

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 VICTOR H. MEWDELSON

6/8/00  
DATE

9. Capital Contributions  
as Shown on record.

\$10,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

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

13. ADDRESS CHANGES ONLY

DOCUMENT # P98000100784  
NAME EWE WAREHOUSE INVESTMENTS IV, INC.  
STREET ADDRESS 300 GRECO AVENUE  
CITY - ST - ZIP CORAL GABLES FL 33146

STREET ADDRESS 3069 TAFT STREET  
CITY - ST - ZIP HOLLYWOOD, FL 33021

DOCUMENT #  
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CITY - ST - ZIP

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CITY - ST - ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

John S. Brown AS Director 4/17/00 954 9876101

CP2E003 (9/91)