2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000054202

1. Entity Name MHIX, LLC



Principal Place of Business

Mailing Address

2604 ARMSTRONG ROAD Tallahassee, FL 32308 2604 ARMSTRONG ROAD TALLAHASSEE, FL 32308

FILED Mar 30, 2007 08:00 AM Secretary of State



03112007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For
NOT APPLICABLE		Not Applicable
5. Certificate of Status Desired		\$5.00 Additional

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

HAIGLER, MITCHELL B 2604 ARMSTRONG ROAD TALLAHASSEE, FL 32308

DO NOT WRITE IN THIS SPACE

 The above named entity submits this statement for the purpose of cha the obligations of registered agent. 	nging its registered office or registered agent, or both, in the	State of Florida. I am familiar with, and accept
SIGNATURE	(NOTE: Registered Agent signature required when renstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2007		

9,	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	HAIGLER, MITCHELL
STREET ADDRESS	2604 ARMSTRONG ROAD
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	
NAME	
STREET ADORESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TATLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADORESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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DO NOT WRITE IN THIS SPACE

11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:	Milen	1	ldan
SIGNATURE	AND TYPED OR PRINTED NAME OF SIGNI	G MANAGING	MEMBER, OR AUTHORIZED REPRESENTATIVE

3-29-07 850-385-0432

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Daytima Phone #