


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT


FILED
Jan 31, 2008 8:00 am
Secretary of State

01-31-2008 90066 049 ***138.75

DOCUMENT # L07000042599	
1. Entity Name AHIW, LLC	

Principal Place of Business 6111 HERONCREST COURT LITHIA, FL 33547 US	Mailing Address 6111 HERONCREST COURT LITHIA, FL 33547 US
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

	
01102008 Chg-LLC CR2E083 (12/06)	
4. FEI Number 20-8888460	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	
CHAN, DELIA W 6111 HERONCREST COURT LITHIA, FL 33547	

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>	
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	
Make check payable to Florida Department of State	

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CHAN, DELIA W 6111 HERONCREST COURT LITHIA, FL 33547 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing 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: <u>Delia Waigint Chon</u>	1-21-08(813)6618293
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE	