PD5000015690

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
Certified Copies Certificates of Status						

Office Use Only



200049782092

04/22/05--01003--007 **35.00

OS APR 22 PH 12: 36
SECRE JARY OF STATE

RAJRO Chy

April 20, 2005

MS SUSAN PAINE C/O DIVISION OF CORPORATIONS 409 E. GAINES STREET TALLAHASSEE, FLORIDA 32399

DEAR SUSAN:

PLEASE FIND ATTACHED THE CHANGEOF REGISTERED AGENT INCLUDING MY CHECK IN THE AMOUNT OF \$ 35.00

IF YOU HAVE ANY QUESTIONS, PLEASE FEEL FREE TO CALL ME ON MY CELL @ 305-898-7068

SINCERELY

WILLIAM FINN

COVER LETTER

TO: Amendment Division of C	Section Corporations				b 90 /000 d.
SUBJECT:	LABOR ADVAN	NTAGE, INC.			
	(Name	of corporation)		•	
DOCUMENT NUM	BER: P05000015690		<u> </u>		- *
The enclosed Stateme	ent of Change of Registered (Office/Agent and fee	are submitted for fil	ling.	
Please return all corre	espondence concerning this n	natter to the followir	ng:		
	WILLIAM F				×
 -	(Name o	of contact person)			
		ANTAGE, INC.		<u>, </u>	* ******
	(Fir	m/Company)			
	7131 BAMBOC	_	-	. A	
	•	(Address)			
_	MIAMI LAKES, FL	ORIDA 33014 ate and zip code)			. • •
Car firsthan information	, · ·	•			
r or further information	on concerning this matter, ple	ease call:			
	WILLIAM FINN	at (305) 898-7068 de & daytime teleph		-
(Name	e of contact person)	(Area co	de & daytime teleph	one number)	1
Enclosed is a \$35.00	check made payable to the D	epartment of State.			
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ame Divis 409 I	et Address: ndment Section sion of Corporations E. Gaines Street hassee, FL 32399	,	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.050 nge is submitted for a corporation organ	nized under the laws of the State of	FLORIDA			
	r to change its registered office or registe		Torida.			
1. The name of t	he corporation: LABOR ADVANTAGE, I	INC.	<u> </u>			
2. The principal	office address: 1167 WEST 68TH STRI	EET HIALEAH, FLORIDA 33014	· · · · · · · · · · · · · · · · · ·			
3. The mailing a	ddress (if different):	-				
4. Date of incorp	poration/qualification: 1/26/2005	Document number: P050000)15690			
	street address of the current registered a tment of State:	gent and registered office on file wi	th the			
	NUNEZ, WILLIAM	·				
	116 LAKE EMERALD DR OAKLAND PARK, FL 33013					
			75 G			
6. The name and (if changed):	street address of the new registered ager	nt (if changed) and /or registered off	OS APR 22 SECRETAL TALLANDAS			
	WILLIAM FINN		SEE.			
	7131 BAMBOO STREET	Γ MIAMI LAKES, FL 33014	112: 36 FLEXIE			
	(P.O. Box NOT acceptable))	ATE A			
The street addre	ss of its registered office and the street be identical.	address of the business office of li	± registered agent,			
Such change wa authorized by th	is authorized by resolution duly adopted be board, or the corporation has been no	d by its board of directors or by an tified in writing of the change.	officer so			
(Signatu	re of an officer or director)	TERESA FINN PRESIDENT (Printed or typed name and	title)			
I hereby accept I further agree to of my duties, and document is bein	the appointment as registered agent an o comply with the provisions of all stat d I am familiar with and accept the obl ng filed merely to reflect a change in th been notified in writing of this change	nd agree to act in this capacity tutes relative to the proper and con ligation of my position as registere we registered office address. There	nnlete performance			
Miller	m time	4/20/2005				
(Sig	mature of Registered Agent)	(Date)				
If signing on be	half of an entity:		•			
WILLIAM FINN						
(T	yped or Printed Name)					

* * * FILING FEE: \$35.00 * * *