

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000015690

**Entity Name:** LABOR ADVANTAGE, INC.

**Current Principal Place of Business:**

4107 N.W. 135 STREET  
OPA LOCKA, FL 33054

**Current Mailing Address:**

P.O. BOX 4584  
HIALEAH, FL 33014

**FEI Number: 38-3714758**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

FINN, WILLIAM  
4107 N.W. 135 STREET  
OPA LOCKA, FL 33054 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title	P	Title	VPO
Name	FINN, TERESA	Name	JOHNSEN, JOSEFINA
Address	4107 N.W. 135 STREET	Address	4107 N.W. 135 STREET
City-State-Zip:	OPA LOCKA FL 33054	City-State-Zip:	OPA LOCKA FL 33054

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: TERESA FINN**

**PRESIDENT**

**01/16/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date