

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000458420

**Entity Name:** LABA TAX GROUP LLC

**Current Principal Place of Business:**

471 ACACIA TREE WAY  
KISSIMMEE, FL 34758

**Current Mailing Address:**

471 ACACIA TREE WAY  
KISSIMMEE, FL 34758 OS

**FEI Number:** 87-3196453

**Certificate of Status Desired:** No

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

LABA, DMYTRO  
471 ACACIA TREE WAY  
KISSIMMEE, FL 34758 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

**Authorized Person(s) Detail :**

Title P  
Name LABA, DMYTRO  
Address 471 ACACIA TREE WAY  
City-State-Zip: KISSIMMEE FL 34758

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DMYTRO LABA

**OWNER**

**03/08/2025**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date