## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

MIAMI FL 33173

3. Mailing Address

City & State

Suite, Apt. #, etc.

10200 SUNSET DRIVE

## DOCUMENT # F0000005213

Country

NATIONAL REGISTERED AGENTS, INC.

526 EAST PARK AVENUE TALLAHASSEE FL 32301

the obligations of registered agent.

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

8. The above named entity submits this statement for the purpose of changing its registered office or registere

1. Entity Name

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

SIGNATURE

10200 SUNSET DRIVE

MIAMI FL 33173

ADP TOTALSOURCE MI XXX, INC.



Country

Name

City

Street Address (P

(NOTE: Registered Agent signature required when reinstating)

## FILED Feb 04, 2003 8:00 am Secretary of State

02-04-2003 90072 022 \*\*\*150.00

AUNTATA

CHECK HERE IF MAKING CHANGES	
4. FEI Number 38-3326137	Applied For
	Not Applicable
E Cortitionto of Statue Degree	75 Additional Required
7. Name and Address of New Registered Agen	t
O. Box Number is Not Acceptable)	
FL <sup>2</sup>	Zip Code
d agent, or both, in the State of Florida. I am famili	ar with, and accept

DATE

FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. ☐ Addition **X** Change Secretaru TITLE **Delete** TITLE Robert J. Singer SINGER, ROBERT J NAME NAME One POP Blvd. STREET ADDRESS ONE ADP BOULEVARD STREET ADDRESS Poseland NJ 07068 **ROSELAND NJ 07068** CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITI F AS **CUETO, WILLIAM** NAME STREET ADDRESS 10200 SUNSET DRIVE STREET ADDRESS CITY-ST-ZIP MIAMI FL 33173 CITY-ST-ZIP ☐ Addition Change TITLE Delete TITLE NAMÉ NAME RODRIQUEZ, CARLOS STREET ADDRESS 10200 SUNSET DRIVE STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33173** CITY-ST-7IP )EO 🔽 Change ☐ Addition Delete TITLE **TCFO** TITLE Sergio Fernandez 10200 Sunset Drive NAME FERNANDEZ. SERGIO NAME STREET ADDRESS 10200 SUNSET DRIVE STREET ADDRESS CITY-ST-ZIP HIGHI, PL 33173 **MIAMI FL 33173** CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

<u>1/30/03</u>

Daytime Phone #