.	PROFIT	FLORIDA DEI	PARIMENT OF STATE			
	RPORATION (III)	Sann	ra B. Mortham			
ANN	UAL REPORT		etary of State			
	1996	DIVIS:ON C	F CORPORATIONS			
DOCU 1. Corporation		0006115				
OTUA	TELL SERVICES, INC.	•				
Principal Place of Business Mailing Address			·			
ONE ADP BLVD.		ONE ADP BLVD., MS 433				
ROSEI	AND, NJ 07068	ROSELAND, NJ	07068	3. Date incorporated or Qualified 12/15/95	3a. Date of Last	Report
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number		Applied For
21		26		23-1856958		Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.		5. Certificaté of Status Desired		5 Additional Required
City & Sta	te	City & State	V	Election Campaign Financing Trust Fund Contribution		00 May Be led to Fees
Ζιρ 24	Country 25	Ζιρ 29	Country 30	This corporation has liability for Florida Statutes Yes	intangible tax under :	s 199.032,
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New F	Registered Agent	
Talla	hassee, FL 32301		84 City		85 7	Zio Code
11. Pursuant	to the provisions of Sections E07.050	2 and 607.1508, Florida Stah	84 City	oration submits this statement for the pu	FL	Zip Code registered office
11. Pursuant	to the provisions of Sections E07.050	TJA SUCH CHARLES WAS AUTHOR	84 City Ites, the above named corporation's loss and the formount on the corporation's loss and the corporation of the corporation o	iration submits this statement for the pu ard of directors. Thereby accept the app	FL	ron atom d office
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[64 CITY S1-ZIP]

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report is strue 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 couporation or the receiver or trustee en powered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

ROBERT J. Subser 4/25/96

SIGNATURE AND LYPE OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR.

**Comparison of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further control of the comparison of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further control of the comparison of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further control of the comparison of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further control of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further control of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further control of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further control of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further control of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further control of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further control of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further control of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further control of the exemption stated in Section 119.07(3)(ii), Florida Statutes and that my control of the exemption stated in Section 119.07(3)(ii), Florida Statutes and that my control of the exemption stated in Sec