2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Mailing Address

10200 SUNSET DRIVE

MIAMI FL 33173-3033

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

H20911 **DOCUMENT #**

Country

6. Name and Address of Current Registered Agent

1. Entity Name

Principal Place of Business

2. Principal Place of Business

NRAI SERVICES, INC.

526 EAST PARK AVE. TALLAHASSEE FL 32301

10200 SUNSET DRIVE

MIAMI FL 33173-3033

Suite, Apt. #, etc.

City & State

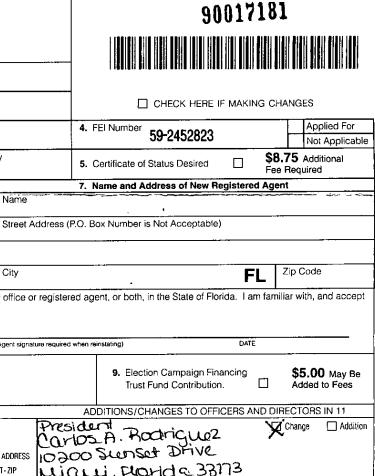
Zip

ADP TOTALSOURCE GROUP, INC.



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

02-04-2003 90072 020 ***150.00



			City			FL	Zip Code	9
8. 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. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					Election Campaign Financing Trust Fund Contribution.	9 🗇		D May Be to Fees
10.	OFFICERS AND DIRECTO	RS	11.		ITIONS/CHANGES TO OFFICERS			S IN 11
NAME STREET ADDRESS	PDST RODRIGUEZ, CARLOS A 10200 SUNSET DRIVE MIAMI FL 33173	Delete ·	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Presider Carlos 10300; Wiau	7 A. Rodriguez Sunset Drive i, Morld a 33173	×	Change	☐ Addition
NAME STREET ADDRESS	AS CUETO, WILLIAM 10200 SUNSET DR. MIAMI FL 33173	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition
NAME STREET ADDRESS	CFO CARLOS A RODRIGUEZ 10200 SUNSET DR. MIAMI FL 33173	Defete	NAME STREET ADDRESS CITY-ST-ZIP].Change	Addition
NAME STREET ADDRESS	CFO FERNANDEZ, SERGIO 10200 SUNSET DRIVE MIAMI FL 33173	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP] Change	☐ Addition
STREET ADDRESS	s Singer, Robert One adp Boulevard Roseland nj 07068	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				} Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ortify that the information supplied with this filling	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		40 OT(OV) Florida Contra - Little		Change	Addition

Country

Name

rineled verify that the morniation supplied with this mining does not qualify for the exemption stated in Section 119.07(3)(I). Florida statutes. 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:

CR2E034 (10/02)