2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 05, 2001 8:00 am Secretary of State **DOCUMENT # K75226** 1. Entity Name ADP TOTALSOURCE FL XIX, INC. 02-05-2001 90086 007 ***150.00 Principal Place of Business Mailing Address 2850 DOUGLAS RD. 10200 SUNSET DR CORAL GABLES FL 33134 **MIAMI FL 33173** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0121767 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MARSTON, ELIZABETH J. Street Address (P.O. Box Number is Not Acceptable) 10200 SUNSET DR **MIAMI FL 33173** Zip Code FL 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. 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 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CFO TITLE ☐ Addition ☐ Delete TITLE FERNANDEZ, SERGIO NAME NAME STREET ADDRESS 10200 SUNSET DR STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33173** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition SINGER, ROBERT NAME NAME STREET ADDRESS ONE ADP BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **ROSELAND NJ 07068** ☐ Addition TITLE ☐ Delete TITLE ☐ Change CUETO, WILLIAM F. NAME NAME STREET ADDRESS 10200 SUNSET DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33173 Delete TITLE TITI F ☐ Change ☐ Addition SALDRIGAS, CARLOS A. NAME NAME STREET ADDRESS 10200 SUNSET DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33173** TITLE ☐ Delete TITLE Change ☐ Addition RODRIGUEZ, CARLOS A NAME NAME 10200 SUNSET DR STREET ADDRESS STREET ADDRESS CITY-ST-7IP **MIAMI FL 33173** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR