


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 10, 2007 08:00 AM
Secretary of State

DOCUMENT # L34542

1. Entity Name
ADP TOTALSOURCE FL XVI, INC.



Principal Place of Business
10200 SUNSET DR
MIAMI, FL 33173

Mailing Address
10200 SUNSET DR
MIAMI, FL 33173

DO NOT WRITE IN THIS SPACE



02262007 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0161093

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution, **\$5.00** May Be Added to Fees

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPS SINGER, ROBERT J ONE ADP BLVD ROSELAND, NJ 07068 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AS CUETO, WILLIAM 10200 SUNSET DR MIAMI, FL 33173 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SVP MASEDA, MIKE 10200 SUNSET DR MIAMI, FL 33173 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P RODRIGUEZ, CARLOS 10200 SUNSET DR MIAMI, FL 33173 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CFO FERNANDEZ, SERGIO 10200 SUNSET DR MIAMI, FL 33173 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

U00000697163
04/18/07-80030-008 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  William Cueto 3/26/07 305/630-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #