

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

03-03-2004 90152 001 ***150.00

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1. Entity Name
ADP TOTALSOURCE MI VI, LLC

Principal Place of Business
**10200 SUNSET DR.
 MIAMI, FL 33173**

Mailing Address
**10200 SUNSET DR.
 MIAMI, FL 33173**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01072004 Chg-LLC CR2E083 (10/03)

4. FEI Number
65-0945794

Applied For
 Not Applicable

5. Certificate of Status Desired **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NRAI SERVICES, INC.
 526 E. PARK AVE.
 TALLAHASSEE, FL 32301**

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
 Due by May 1, 2004**

**Make check payable to
 Florida Department of State.**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE **P** Delete
 NAME **RODRIGUEZ, CARLOS A**
 STREET ADDRESS **10200 SUNSET DR.**
 CITY-ST-ZIP **MIAMI, FL 33173**

TITLE **manager** Change Addition
 NAME **Carlos Rodriguez**
 STREET ADDRESS **10200 Sunset Drive**
 CITY-ST-ZIP **MIAMI, Florida 33173**

TITLE **CFO** Delete
 NAME **FERNANDEZ, SERGIO**
 STREET ADDRESS **10200 SUNSET DR.**
 CITY-ST-ZIP **MIAMI, FL 33173**

TITLE **manager** Change Addition
 NAME **Peter Stewart**
 STREET ADDRESS **10200 Sunset Drive**
 CITY-ST-ZIP **MIAMI, Florida 33173**

TITLE **AS** Delete
 NAME **CUETO, WILLIAM**
 STREET ADDRESS **10200 SUNSET DRIVE**
 CITY-ST-ZIP **MIAMI, FL 33173**

TITLE **manager** Change Addition
 NAME **William Cueto**
 STREET ADDRESS **10200 Sunset Drive**
 CITY-ST-ZIP **MIAMI, FL 33173**

TITLE **S** Delete
 NAME **SINGER, ROBERT**
 STREET ADDRESS **ONE ADP BLVD.**
 CITY-ST-ZIP **ROSELAND, NJ 07068**

TITLE **manager** Change Addition
 NAME **Robert Singer**
 STREET ADDRESS **One ADP Blvd.**
 CITY-ST-ZIP **ROSELAND, NJ 07068**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE **William Cueto** **1/7/2004** **3051201000**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #