


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2004 8:00 am
Secretary of State

03-03-2004 90003 038 ***150.00

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1. Entity Name
ADP TOTALSOURCE, INC.



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

Mailing Address
**10200 SUNSET DR.
 MS 433
 MIAMI, FL 33173**

54014263



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

01072004 Chg-P CR2E034 (10/03)

City & State

4. FEI Number
59-3216484

Applied For
 Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent

**NRAI SERVICES, INC.
 526 EAST PARK AVENUE
 TALLAHASSEE, FL 32301**

7. Name and Address of New Registered Agent

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)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: **P** Delete
 NAME: **RODRIGUEZ, CARLOS**
 STREET ADDRESS: **10200 SUNSET DR.**
 CITY-ST-ZIP: **MIAMI, FL 33175**

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: **CPO** Delete
 NAME: **FERNANDEZ, SERGIO**
 STREET ADDRESS: **10200 SUNSET DR.**
 CITY-ST-ZIP: **MIAMI, FL 33175**

TITLE: **Division Controller** 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 DR.**
 CITY-ST-ZIP: **MIAMI, FL 33175**

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
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TITLE: Delete
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 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **William Cueto** **4/7/2004** **2056201000**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #