

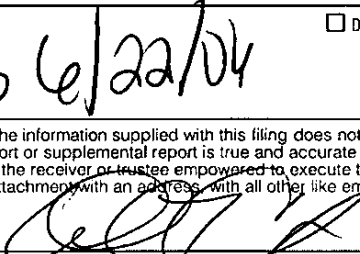


2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

2006 JUN 21 PM 12: 52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000086357					
1. Entity Name ADP TOTALSOURCE, INC.					
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.		05222006 Chg-P CR2E034 (11/05)	
City & State		City & State		4. FEI Number 59-3216484	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent			
NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD SINGER, ROBERT ONE ADP BLVD ROSELAND, NJ 07068	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP Service + operations <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition MILCE MASEDA 10200 SUNSET Drive MIAMI FL 33173	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RODRIGUEZ, CARLOS 10200 SUNSET DR. MIAMI, FL 33175	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	800076639358 <input type="checkbox"/> Change <input type="checkbox"/> Addition 06/27/06--01035--014 **61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO TERZO, DANTE 10200 SUNSET DR. MIAMI, FL 33175	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS CUETO, WILLIAM 10200 SUNSET DR. MIAMI, FL 33175	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO Sergio Fernandez <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 10200 Sunset Drive Miami, FL 33173	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	B 6/22/04		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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		6/7/2006 CIB05-630-1000	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Date</small>	

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JUN 08 2006
CIB05-630-1000