


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED**  
**May 07, 1999 8:00 am**  
**Secretary of State**

05-07-1999 90167 047 \*\*\*150.00

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<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>				FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # S35085</b>					
1. Corporation Name <b>CAR INK, INC.</b>					
Principal Place of Business <b>ONE ADP BLVD ROSELAND NJ 07068 US</b>			Mailing Address <b>ONE ADP BLVD MS 433 ROSELAND NJ 07068 US</b>		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>03/04/1991</b>	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number <b>65-0246760</b>	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
24	Country	29	Country	8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent <b>RUSSO, DAISY 6190 SW 120 ST. MIAMI FL 33156</b>				10. Name and Address of New Registered Agent	
				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				FL	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
12. OFFICERS AND DIRECTORS					
TITLE	PSD	<input type="checkbox"/> DELETE			
NAME	BENSON, JAMES B				
STREET ADDRESS	ONE ADP BLVD				
CITY-ST-ZIP	ROSELAND NJ 07068				
TITLE	VC	<input type="checkbox"/> DELETE			
NAME	HAVILAND, RICHARD J				
STREET ADDRESS	ONE ADP BLVD				
CITY-ST-ZIP	ROSELAND NJ 07068				
TITLE	VT	<input type="checkbox"/> DELETE			
NAME	COLOTTI, RAYMOND L				
STREET ADDRESS	ONE ADP BLVD				
CITY-ST-ZIP	ROSELAND NJ 07068				
TITLE	ASD	<input type="checkbox"/> DELETE			
NAME	SINGER, ROBERT J				
STREET ADDRESS	ONE ADP BLVD				
CITY-ST-ZIP	ROSELAND NJ 07068				
TITLE		<input type="checkbox"/> DELETE			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		<input type="checkbox"/> DELETE			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					



DO NOT WRITE IN THIS SPACE

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES B. BENSON

4/23/99

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994-5525

CR2E034 (11/98)