

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State

05/27/02 AT

DOCUMENT # S39386

1. Entity Name
ADP TOTALSOURCE III, INC.

05-27-2002 90471 001 ***150.00



DO NOT WRITE IN THIS SPACE

Principal Place of Business
10200 SUNSET DRIVE
MIAMI FL 33173
US

Mailing Address
ONE ADP BLVD
MS 433
ROSELAND NJ 07068
US

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

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

City & State

City & State

Zip Country Zip Country

4. FEI Number **59-3058828** 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.
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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE	T <input type="checkbox"/> Delete
NAME	SINGER, ROBERT
STREET ADDRESS	ONE ADP BLVD
CITY-ST-ZIP	ROSELAND NJ 07068
TITLE	P <input type="checkbox"/> Delete
NAME	RODRIGUEZ, CARLOS
STREET ADDRESS	10200 SUNSET DRIVE
CITY-ST-ZIP	MIAMI FL 33173
TITLE	T <input type="checkbox"/> Delete
NAME	FERDANDEZ, SERGIO
STREET ADDRESS	10200 SUNSET DRIVE
CITY-ST-ZIP	MIAMI FL 33173
TITLE	CEO <input checked="" type="checkbox"/> Delete
NAME	SALADRIGAS, CARLOS
STREET ADDRESS	10200 SUNSET DRIVE
CITY-ST-ZIP	MIAMI FL 33173
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	SEC/DIR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: **ROBERT J. SINGER** 04/24/02 973 974-5525
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)