



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Matthew A. Brown, Secretary of State

Corporations Division  
100 North Main Street  
Providence, RI 02903-1335  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00  
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. <b>115502</b>		2. Name of Corporation <b>ADP TotalSource I, Inc.</b>			
3. Street Address Principal Business Office <b>10200 SUNSET DRIVE</b>			City <b>MIAMI</b>	State <b>FL</b>	Zip <b>33173</b>
4. Business Phone No. <b>305-630-1000</b>		5. State of Incorporation <b>FLORIDA</b>		6. SIC Code <b>7880</b>	
7. Brief Description of the Character of Business Conducted in Rhode Island <b>EMPLOYEE LEASING</b>					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>CARLOS RODRIGUEZ</b>			Vice President Name <b>ASST. SECRETARY</b> <b>WILLIAM CUELDO</b>		
Street Address <b>10200 SUNSET DRIVE</b>			Street Address <b>10200 SUNSET DRIVE</b>		
City <b>MIAMI</b>	State <b>FL</b>	Zip <b>33173</b>	City <b>MIAMI</b>	State <b>FL</b>	Zip <b>33173</b>
Secretary Name <b>ROBERT SINGER</b>			Treasurer Name <b>NONE</b>		
Street Address <b>ONE ADP BLVD</b>			Street Address		
City <b>MIAMI</b>	State <b>FL</b>	Zip <b>33173</b>	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <b>ROBERT SINGER</b>			Director Name		
Street Address <b>ONE ADP BLVD</b>			Street Address		
City <b>MIAMI</b>	State <b>FL</b>	Zip <b>33173</b>	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
<b>5,000</b>	<b>COMM</b>	<b>\$1.00</b>	<b>100</b>	<b>COMMON</b>	<b>\$1</b>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\*115502\*

File Date **FEB 21 2005**  
Check No. **148983**  
By: **CB**  
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer **William Cueldo** Date **1/19/2005**  
Print or Type Name of Officer  
**ASST. SECRETARY**  
Title of Officer



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
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Matthew A. Brown, Secretary of State

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100 North Main Street  
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401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 115502		2. Name of Corporation ADP TotalSource I, Inc.		
3. Street Address Principal Business Office 10200 Sunset Drive		City Miami	State FL	Zip 33173
4. Business Phone No.		5. State of Incorporation FLORIDA		6. SIC Code 7880
7. Brief Description of the Character of Business Conducted in Rhode Island EMPLOYEE LEASING				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Carlos Rodriguez		Vice President Name Asst. Secretary William Cuelto		
Street Address 10200 Sunset Drive		Street Address 10200 Sunset Drive		
City Miami	State FL	Zip 33173	City Miami	State FL
Secretary Name Robert Singer		Treasurer Name Peter Stewart		
Street Address Old ADP Boulevard		Street Address 10200 Sunset Drive		
City Roslind	State NJ	Zip 07068	City Miami	State FL
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Robert Singer		Director Name		
Street Address Old ADP Blvd		Street Address		
City Roslind	State NJ	Zip 07068	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES				
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
5,000 COMM \$1.00 PAR VALUE			100	COMMON
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
ISSUED SHARES				
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
			100	COMMON

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 1 1 5 5 0 2 \*

File Date 2-17-04  
 Check No. 137236  
 By: 10P  
 FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statements contained herein are true and correct.

William Cuelto 1/26/2004  
 Signature of Officer Date

William Cuelto  
 Print or Type Name of Officer

Asst. Secretary  
 Title of Officer



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. **115502**  
2. Name of Corporation **ADP TotalSource I, Inc.**  
3. Street Address Principal Business Office  
**10200 Sunset Drive**  
4. Business Phone No. **305-630-1000**  
5. State of Incorporation **FLORIDA**

City **Miami** State **FL** Zip **33173**  
6. SIC Code **7880**

7. Brief Description of the Character of Business Conducted in Rhode Island  
**Professional Employer Organization**

**8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) X FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name **Carlos Rodriguez**  
Street Address **10200 Sunset Drive**  
City **Miami** State **FL** Zip **33173**

Vice President Name **Robert Singer**  
Street Address **One ADP Blvd.**  
City **Roseland** State **NJ** Zip **07068**

Secretary Name **Robert Singer**  
Street Address **One ADP Blvd.**  
City **Roseland** State **NJ** Zip **07068**

Treasurer Name **Sergio Fernandez**  
Street Address **10200 Sunset Drive**  
City **Miami** State **FL** Zip **33173**

**9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name **Robert Singer**  
Street Address **One ADP Blvd.**  
City **Roseland** State **NJ** Zip **07068**

Director Name  
Street Address  
City State Zip

**10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)**

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
**5,000 COMM \$1.00 PAR VALUE**

**11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)**

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**100 Common \$1**

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 1 1 5 5 0 2 \*

File Date: 3.31.03

Check No.: 114043

By: [Signature]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct

[Signature] 1/30/2003  
Signature of Officer Date

**William Cueto**  
Print or Type Name of Officer

**Assistant Secretary**  
Title of Officer

**OFFICERS OF ADP TOTALSOURCE GROUP, INC. AND ITS SUBSIDIARIES**

<b>NAME</b>	<b>ADDRESS</b>	<b>SOCIAL SECURITY.</b>	<b>TITLE</b>
Carlos A. Rodriguez	10200 SUNSET DRIVE MIAMI, FL 33173	264-85-9658	President & Chief Controlling Officer
Sergio Fernandez	10200 SUNSET DRIVE MIAMI, FL 33173	267-78-1438	Chief Financial Officer
Robert J. Singer	ONE ADP BOULEVARD ROSELAND, NJ 07068	156-32-2564	Vice President / Secretary & Director
William F. Cueto	10200 SUNSET DRIVE MIAMI, FL 33173	261-83-2565	Assistant Secretary



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **115502** 2. Name of Corporation **ADP TotalSource I, Inc.**

3. Street Address Principal Business Office **ONE ADP BLVD.** City **ROSELAND** State **NJ** Zip **07068**

4. Business Phone No. **973 974-5525** 5. State of Incorporation **FLORIDA** 6. SIC Code

7. Brief Description of the Character of Business Conducted in Rhode Island

**EMPLOYEE LEASING**

**8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name <b>CARLOS RODRIQUEZ</b> Street Address <b>10200 SUNSET DRIVE</b> City <b>MIAMI</b> State <b>FL</b> Zip <b>33173</b>	Vice President Name <b>ROBERT J. SINGER</b> Street Address <b>ONE ADP BLVD.</b> City <b>ROSELAND</b> State <b>NJ</b> Zip <b>07068</b>
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Secretary Name <b>ROBERT J. SINGER</b> Street Address <b>ONE ADP BLVD.</b> City <b>ROSELAND</b> State <b>NJ</b> Zip <b>07068</b>	Treasurer Name <b>SERGIO FERNANDEZ</b> Street Address <b>10200 SUNSET DRIVE</b> City <b>MIAMI</b> State <b>FL</b> Zip <b>33173</b>
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**9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name <b>ROBERT J. SINGER</b> Street Address <b>ONE ADP BLVD.</b> City <b>ROSELAND</b> State <b>NJ</b> Zip <b>07068</b>	Director Name  Street Address  City State Zip
Director Name  Street Address  City State Zip	Director Name  Street Address  City State Zip

**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

Number of Shares	Class/Series	Par Value
5,000	COMM	\$1.00

**11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)**

Number of Shares	Class/Series	Par Value
100	COMMON	1.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 1 1 5 5 0 2 \*

File Date: 2/19  
Check No.: 115502  
By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer: [Signature] Date: 1/31/01  
Print or Type Name of Officer: Robert J. Singer  
Title of Officer: VP/Sec/Du



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Edward S. Inman, III, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002**  
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **115502** 2. Name of Corporation **ADP TotalSource I, Inc.**  
3. Street Address Principal Business Office **ONE ADP BLVD.** City **ROSELAND** State **NJ** Zip **07068**  
4. Business Phone No. **973-974-5525** 5. State of Incorporation **FLORIDA** 6. SIC Code  
7. Brief Description of the Character of Business Conducted in Rhode Island **EMPLOYEE LEASING**

**8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name <b>CARLOS RODRIQUEZ</b>	Vice President Name <b>ROBERT J. SINGER</b>
Street Address <b>10200 SUNSET DRIVE</b>	Street Address <b>ONE ADP BLVD.</b>
City <b>MIAMI</b> State <b>FL</b> Zip <b>33173</b>	City <b>ROSELAND</b> State <b>NJ</b> Zip <b>07068</b>
Secretary Name <b>ROBERT J. SINGER</b>	Treasurer Name <b>SERGIO FERNANDEZ</b>
Street Address <b>ONE ADP BLVD.</b>	Street Address <b>10200 SUNSET DRIVE</b>
City <b>ROSELAND</b> State <b>NJ</b> Zip <b>07068</b>	City <b>MIAMI</b> State <b>FL</b> Zip <b>33173</b>

**9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name <b>ROBERT J. SINGER</b>	Director Name
Street Address <b>ONE ADP BLVD.</b>	Street Address
City <b>ROSELAND</b> State <b>NJ</b> Zip <b>07068</b>	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

**10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)**

AUTHORIZED SHARES  
Number of Shares Class/Series Par Value  
**5,000 COMM \$1.00 PAR VALUE**

**11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)**

ISSUED SHARES  
Number of Shares Class/Series Par Value  
**100 COMMON 1.00**

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 1 1 5 5 0 2 \*

File Date: 1-29-02  
Check No.: 51494  
By: [Signature]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.  
Signature of Officer [Signature] Date 1/22/02  
Print or Type Name of Officer **ROBERT J. SINGER**

VP/S/D  
Title of Officer