

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED  
 Aug 19 1998 8:00am  
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
 Sandra B. Mortham  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # P29551 (9)  
 1. Corporation Name NATIONAL DECISION SYSTEMS, INC.



Principal Place of Business 1600 PEACHTREE ST. NW ATLANTA GA 30309  
 Mailing Address 1600 PEACHTREE ST. NW ATLANTA GA 30309

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/25/1990  
 4. FEI Number 95-3362303 Applied For Not Applicable  
 5. Certificate of Status Desired \$8.75 Additional Fee Required  
 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees  
 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

2. Principal Place of Business  
 21 5375 Mira Sorrento Pl. Suite, Apt. #, etc. Suite 400  
 22 City & State San Diego, CA  
 23 Zip 92121 Country USA  
 24  
 2a. Mailing Address  
 26 40 VNU USA, INC., 1515 Broadway Suite, Apt. #, etc. 15th Floor  
 27 City & State New York, NY 10036  
 28 Zip 10036 Country USA  
 29 30

9. Name and Address of Current Registered Agent  
 NATIONAL CORPORATE RESEARCH, LTD., INC.  
 1406 HAYS STREET  
 SUITE #2  
 TALLAHASSEE FL 32301

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	CD	<input type="checkbox"/> DELETE
NAME	ROGERS, C.B. JR.	
STREET ADDRESS	2880 PEACHTREE RD.,N.W.	
CITY-ST-ZIP	ATLANTA GA	
TITLE	VDC	<input type="checkbox"/> DELETE
NAME	MCGLAUGHLIN, DAN W	
STREET ADDRESS	3430 TUXEDO ROAD	
CITY-ST-ZIP	ATLANTA GA	
TITLE	P	<input type="checkbox"/> DELETE
NAME	NYE, WENDELL S.	
STREET ADDRESS	2374 NEWPORT AVE	
CITY-ST-ZIP	CARDIFF CA	
TITLE	AVP	<input type="checkbox"/> DELETE
NAME	STAGMEIER, J.H.	
STREET ADDRESS	2030 BROOKWOOD VALLEY CIR, NE	
CITY-ST-ZIP	ATLANTA GA	
TITLE	T	<input type="checkbox"/> DELETE
NAME	MAZZILLI, PHILIP J	
STREET ADDRESS	11850 MTN. LAUREL DR	
CITY-ST-ZIP	ROSWELL GA	
TITLE	S	<input type="checkbox"/> DELETE
NAME	ZAKAS, MARIETTA E.	
STREET ADDRESS	3085 E PINE VALLEY ROAD	
CITY-ST-ZIP	ATLANTA GA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Martin R. Feely	
1.3 STREET ADDRESS	11 West 42nd St.	
1.4 CITY-ST-ZIP	New York, NY 10211	
2.1 TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Charles E. Leonard, III	
2.3 STREET ADDRESS	11 West 42nd St.	
2.4 CITY-ST-ZIP	New York, NY 10211	
3.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Robert Nascanzi	
3.3 STREET ADDRESS	5375 Mira Sorrento Pl.	
3.4 CITY-ST-ZIP	San Diego, CA 92121	
4.1 TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Frederick A. Steinmann	
4.3 STREET ADDRESS	1515 Broadway	
4.4 CITY-ST-ZIP	New York, NY 10036	
5.1 TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Tom Compogianis	
5.3 STREET ADDRESS	5375 Mira Sorrento Pl.	
5.4 CITY-ST-ZIP	San Diego, CA 92121	
6.1 TITLE	Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	James A. Ross	
6.3 STREET ADDRESS	1515 Broadway	
6.4 CITY-ST-ZIP	New York, NY 10036	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE \_\_\_\_\_ DATE 8/11/98 (12)526-5085

CR2E034 (5/98)