F95000006000

TO: Qualification/Tax Lien Section Division of Corporations

SUBJECT: Predictive Business Decision Systems, Inc.

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Flor'da", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Michael J. Banasiak	
PROS (Name of Person)	DIVISION 95 DEC
261 Harvey Ave.	FILED N OF CORPC
Lincroff, NJ 07738	ORATIONS H 9: 23
/(City/State/Zin)	

Should you need to call someone concerning this matter, please call:

at (Area Code & Daytime Telephone Number)

COURIER ADDRESS:

(Name of Person)

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399 **MAILING ADDRESS:**

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Predictive Business Decision Systems Incorporate (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. New Terrey (State or country under the law of which it is incorporated) 3. (FEI number, if applicable)
4. Aug. 14 1995 (Duration: Year cosp. will cease to exist or "perpetual") 6. December 15 1995 (Date first transacted business in Florida. (See sections 607.1501, 607.1502, AND 817.155, F.S.)
7. 261 Harvey Avenue Ban
8. Statistical Angly and Consulting (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Ronald Banasigk
Office Address: 2715 4th Street 5W Lehigh Acres, Florida, 33971 (Zip Code)
10. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. (Registered agent's signature)
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O . Box NOT acceptable) Chairman: Address: Vice Chairman:___ Address: Director: Address: Director: Address; ______ B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: Mic Vice President: Address: Secretary: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vide Chairman, or any officer listed in number 12 of the application)

(Typed or printed name and capacity of person signing application)

NEW JERSEY SECRETARY OF STATE

PREDICTIVE DUSINESS DECISION SYSTEMS, INCORPORATED

I, THE SECRETARY OF STATE OF THE STATE OF NEW JERSEY, DO HEREBY CERTIFY THAT THE RECORDS OF THIS OFFICE SHOW THAT THE CHARTER/AUTHORITY OF THE ABOVE-NAMED NJ BUSINESS WAS FILED IN THIS OFFICE ON AUG. 14,1995.

T FURTHER CERTIFY, THAT SO FAR AS THE RECORDS OF THIS OFF AS AND BUSINESS HAS NOT BEEN DISSOLVED, CANCELLED, OR WITHDRAWN, NOTHING THE CHARTER/AUTHORITY BEEN VOIDED/REVOKED FOR NON-PAYHUNT OF STATE OF NEW JERSEY. AT THE TIME OF THE ISSUANCE OF THIS CERTIFICS FOR ANNUAL REPORTS ARE CURRENT.

I FURTHER CERTIFY THAT THE LOCATION OF THE REGISTERED OFFICE IS

261 HARVEY AVENUE

LINCROFT

NJ 07738

AND THE REGISTERED AGENT IS MICHAEL J BANASIAK.

NOV. 30,1995

