	OW: FILING FEE	<u>AFTER</u> I	MAY '	<u> </u>	<u>\$</u> 5	<u>550.00</u>	_			$\alpha$
	ROFIT	FLORIDADEPARTMENT			NT OF STATE		FILED			(' <i>)</i> /
•	PORATION AL REPORT	Sandra B. Mortham								
		Secretary of State DIVISION OF CORPORATIONS					07 00T 01	D15	1: 2h	
						.5115	97 OCT 21,	£43	1.64	
DOCUMENT # F96 00000 5323						eserves and the defi	oz 192 !	STATE		
1. Corporation Name						SECREDARY OF STATE TALLAHASSEE, FLORIDA				
Nielsen Media Research, Inc.						IALLEN UNES	Ser but			
	<b>,</b>									
Principal Place	of Business	Malling Addre	ess							
299 Park Avenue C/O Cognizant Corporation Purch						e Duest	ļ			
299 Park Avenue C/O Cognizant Corporation New York NY 10171 200 Nyala Farms Road						3. Date Incorporated or Qualified	Tan Date	(		
		/estport, CT (					10/14/96	N/A	e of Last Rep	JOIL
2. Principal Pla		2a. Malling Address					4. FEI Number	110/	A	Applied For
21 Sulto And #	Ala	26					06-1463993			lot Applicable
Suite, Apt. #,	, <del>e</del> ic.	Sulte, Apt.	#, etc.				5. Certificate of Status Desired			5 Additional Regulred
City & State	<del>10 t</del>	City & Stat	le			······································	6. Election Campaign Financing			00 May Be
23		28		·			Trust Fund Contribution		Adde	ed to Fees
Zip 24]	Country 25	Zip			untŋ	y	8. This corporation has liability fo			s. 199.032,
-7	9. Name and Address of Current	<del></del>	nt	30]			Florida Statutes Ye 10. Name and Address of New R		·	
AT 6		THE POST OF THE			81	Name	Hume with Americas Of NEW K	Risteled	<u>whelit</u>	
CT Corporation System					82	82 Street Address (P.O. Box Number is Not Acceptable)				
1200 South Pine Island Road					83		200 (1.00. DON HARMON TO HOU PAUCOPREDIO)			
Plantation, FL 33324										
					84 City			FL	85 Zip	Code
office or regi	the provisions of Sections 607.0502 Istered agent, or both, in the State of familiar with, and accept the obligation	Florida. Such cha	inge was a	uthorized	yd t	the corporatio	oration submits this statement for th n's board of directors. I hereby acce	e purpose pt the app	of changing pointment as	j its registered ; registered
	Signature, typed or printed name of regist		if applicable.				gent signature required when reinstating)		DATE	
12. TITLE	7	D DIRECTORS	DELETE		13.		ADDITIONS/CHANGES TO OF	FICERS A		
NAME	President John A. Dimling		DELETE			TITLE Name	300002	-3 -3 -	Change 1. I⊃ I⊃ ∵	∐Addition ∃——2
STREET ADDRESS	299 Park Avenue					STREET ADDRESS			01088-	
CITY - ST - ZIP	New York NY 10171				1.40	CITY - ST - ZIP	*****			185.00
rinle	Secretary				21 TITLE		11-11-11		Change	Addition
NAME Street address	Kenneth S. Siegel					NAME				
STREET ADURESS	200 Nyala Farms Road					STREET ADDRESS CITY - ST - ZIP				
TITLE	Westport, CT 06880		DELETE	$\dashv$		TITLE	<u> </u>			
NAME	Lesiye G. Katz	<b>L</b> l	DELETE			NAME			Change	Addition
STREET ADDRESS	200 Nyala Farms Road					STREET ADDRESS				
CITY-ST-ZIP	Westport, CT 06880					CITY - ST - ZIP	· · · · · · · · · · · · · · · · · · ·	****		
ritle Name	Assistant Secretary		DELETE			TITLE			Change	Addition
TREET ADDRESS	Jared T. Finkelstein 200 Nyala Farms Road			ļ		NAME STREET ADDRESS				
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'ine	Assistant Treasurer		DELETE	$\neg$	5.1 T	TITLE			Cha	
VAME	Michael T. Boland	لــا	DELCIE		5.2 N	AME		لــا	Change	Addition
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TREET ADDRESS	David Schwartz-Leeper 299 Park Avenue					TREET ADDRESS		_	4.0	1 1/42
DITY - ST - ZIP	ST-ZIP New York NY 10171				6.4 CITY - ST - ZIP				J 16	<i>!</i> •
4. I do hereby o	ertify that the Information supplied w	ith this filing does	not qualify	for the e	xen	nption stated in	n Section 119.07(3)(i), Florida Statu	tes. I furth	er certify the	at the
information t that I am an	Indicated on this annual report or sup officer or director of the corporation of block 12 or Block 13 if changed, or or	oplemental annual or the receiver or t	l report is tr trustee emj	ue and a	accu	rrete and that r	my signature shall have the same le	nal effect	as if made u	Inder oath:
SIGNATU	JRE: Michael T. Boland -	Assistant Tr	easurer	2	72		Mr. 195	03-222	2-4587	
	SIGNATURE AND TYPE				CER	OR DIRECTOR	Date		Daytime Phor	ne #

Date

Daytime Phone #

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## **Cognizant Corporation**

Maryanne Piorek Associate Manager - Tax Compliance Corporate Tax Department 200 Nyala Farms Rd. Westport, CT 06880 203-222-4587 Fax: 203-222-4552

October 21, 1997

Division of Corporations Annual Reports Section 409 East Gaines Street Tallahassee, FL 32399

Attention: Shawn Logan

RE: NIELSEN MEDIA RESEARCH, INC.

F.E.J.N. 06-1463993

1997 Florida Annual Report

Dear Mr. Logan:

I spoke with your department on the telephone Tuesday, October 21, 1997 regarding the status of the above mentioned company. I was informed that Nielsen Media Research, Inc. was revoked from the State of Florida since they did not file their 1997 annual report on a timely basis. However, we explained to you that we have no record of ever receiving an annual report from your department. You instructed us to file a blank annual report on behalf of this company as soon as possible. We have enclosed a completed 1997 Florida Annual Report along with a check in the amount of \$165.00 to cover the filing fee due. In order to avoid any future problems, please send next year's annual report to the following address:

Nielsen Media Research, Inc. C/O Cognizant Corpoartion 200 Nyala Farms Road Westport, CT 06880 Attention: Maryanne Piorek (Tax Department)

Kindly acknowledge receipt of the enclosed by stamping the duplicate of this letter and return it in the stamped self-addressed envelope enclosed for your convenience.

Very truly yours,

Maryanne Piorek

Maryanne Piorek

Associate Manager - Tax Compliance