SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # P22770 (2)ARTEKNA DESIGN, A PROFESSIONAL CORPORATION Principal Place of Business Mailing Address **8335 ALLISON PTE TR** H335 ALLISON PTE TR STE 110 STE 110 INDIANAPOLIS IN 46250 INDIANAPOLIS IN 46250 3. Date Incorporated or Qualified 3a. Date of Last Report 01/30/1989 10/12/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 35-1739026 26 Not Applicable Suite, Apl. #. etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zio Country Country 8. This corporation has hability for intangible tax under s. 199,032 24 25 29 30 Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name ASENDORF, JOHN 724 IRMA STREET Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32803 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 637.1508, 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 horeby accept the appointment as registered agent, and accept the obligations oil. Section 607.0505, Florida Statutes. SIGNATURE Signature, typica or prodecinante of registered agent and not a applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (36/8)TITLE DELETE 1 1 11/16 Change Addition HIBLER, ROBERT D. NAME 1.2 NAME CR2E034 25825 GWIN ROAD STREET ADDRESS 1.3 STREET ACORESS ARCADIA IN CITY - ST - ZIP 1.4 CITY - ST-ZIP TITLE DELETE T۷ 21 TITLE Change Addition FRANK, TIMOTHY J. NAME 2.2 NAME STREET ADDRESS 3210 BIRDSONG COURT 2.3 STREET ADDRESS **GREENFIELD IN** City-St-ZiP 2 4 CITY - ST-ZIP TITLE DELETE 3 1 TITLE Change Addition VYAIN, JENNY A. NAME 3.2 NAME 7311 OAKLAND HILLS CT STREET ADDRESS 3.3 STREET ADDRESS INDIANAPOLIS IN CITY - ST - ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY - ST - ZIP TITLE DELETE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 54 CITY - ST-ZIP TITLE DELETE 61 TITLE Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 14. I do hereby certify that the lation supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes I is a finite state of the same all annual report is true and accurate and that my signature shall have the same legal effect as if the corporation or the receiver or trusted empowered to execute this report as required by Chapter 617, Florida Statutes, and the property of an attachment with an address. further certify that the made under oath. that my name as SIGNATURE:

INTED VAME OF SIGNING OFFICER OF CIRECTOR