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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 CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

	MENT # P9400 R MADARY DESIGN GROU	•	9)) (PA)(PA) (NA HIN) BIBIC BAIN BIBIC	######################################
Principal Plac	ce of Business	Mailing Address			
859 PINE VI ROCKLEDGI	IEW AVENUE E FL 32955	859 PINE VIEW AVENU ROCKLEDGE FL 32955			
				3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal F	Place of Business	2a. Mailing Address		07/21/1994 4. FEI Number	05/01/1995
21		26		59-3247270	Applied For
Suite, Apt.	#, etc	Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22 City 8 Cto		27		5. Certificate of Status Desired	Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
Zıp	Country	Zip	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	This corporation has liability for Florida Statutes	intangible tax under si 199.032, Yes 🔀 No
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Re	
	ADARY, CHARLES R III		81 Name		
	59 PINE VIEW AVENUE		82 Street Add	dress (PO. Box Number is Not Acceptab	le)
Rt	OCKLEDGE FL 32955		83		
			84 City		7 0
agent la	to the provisions of Sechons 607.05 egistered agent, or both, in the State or familiar with, and accept the oblig	02 and 607.1508. Florida Statut e of Florida. Such change was a gations of, Section 607.0505, Flo	es, the above named corp	poration submits this statement for the purion's board of directors. Thereby accept	rpase of changing its registered the appointment as registered
agent La SIGNATURE 12.	m familiar with, and accept the oblig Signature byted or period name of registered as OFFICERS AR	gations of, Section 607.0505, Fk	es, the above named corp	ired when remained)	rpose of changing its registered the appointment as registered
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GNATURE:

Signature and type observed and the information indicated with this series is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(k). Florida Statutics 1 to their certify that the information indicated on his annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under pair, that I am an officer or director of the corporation or the receiver or frustee empowered to execute this report as required by Chapter 617, Florida Statutics 1 that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

GNATURE:

Signature and the mornation indicated on his annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if the made under pair in the information indicated on his annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if the made under pair in the information indicated on his annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if the made under pair in the information indicated on his annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if the made under pair in the information indicated on his annual report is true and accurate and that my signature shall have the same legal effect as if the made under pair in the information indicated on his annual report is true and accurate and accurate and accurate and accurate annual report is true and accurate and accurate and accurate annual report is true annual report is true and accurate annual report is true annual report is true annual repor

SIGNATURE:

GENERAL POWER OF ATTORNEY

I, Charles Read Madary 3, residing at 859 Pine View Ave., Rockledge, Florida 32955, hereby appoint Karin Dehnert Madary of 859 Pine View Ave., Rockledge, Florida 32955, USA, as my Attorney-in-Fact, to act in my name and place, and for my benefit on my behalf with authority to do the following:

- Open, maintain or close bank accounts (including, but not limited to checking accounts, savings accounts, and certificates of deposit), brokerage accounts, and other similar accounts with financial institutions.
 - a. Conduct any business with any banking or financial institution with respect to any of my accounts, including but not limited to, making deposits and withdrawals, obtaining bank statements, passbooks, drafts, money orders, warrants, and certificates or vouchers payable to me by any person, firm, corporation or political entity.
 - Perform any act necessary to deposit, negotiate, sell or transfer any note, security, or draft of the United States of America, including U.S. Treasury Securities.
 - c. Have access to any safety deposit box that I might own, including its contents.
- Sell, exchange, buy, invest, or reinvest any assets or property owned by me.
- 3. Take any and all legal steps necessary to collect any amount or debt owed to me, or to settle any claim, whether made against me or asserted on my behalf against any other person or entity.
- 4. Enter into binding contracts on my behalf.
- 5. Sell, convey, lease, mortgage, manage, insure, improve, repair, or perform any other act with respect to any of my property (now owned or later acquired), including but not limited to, real estate and real estate rights (including the right to remove tenants and to recover possession).

If the Attorney-in-Fact named above is my spouse, then I also hereby appoint Diane Stottler Elder, as my Attorney-in-Fact solely for the purpose of releasing any dower or other inchoate interest I might have in any property, including my homestead specifically described above.

- 6. Prepare, sign, and file documents with any governmental body or agency, including but not limited to, authorization to:
 - a. Prepare, sign and file income and other tax returns with federal, state, and local and other governmental bodies.

- b. Obtain information or documents from any government or its agencies, and negotiate, compromise, or settle any matter with such government or agency.
- c. Prepare applications, provide information, and perform any other act reasonably requested by any government or its agencies in connection with governmental benefits.

This Power of Attorney is intended to be a General Power of Attorney. The listing of specific powers is not intended to limit or restrict the general powers granted in this Power of Attorney in any manner.

I hereby grant to my Attorney-in-Fact full right, power and authority to do every act, deed and thing necessary or advisable to be done concerning the above powers, as fully as I could do if personally present and acting.

This Power of Attorney shall become effective immediately, shall not be affected by my disability or lack of mental competence, and shall continue effective until my death; provided, however, that this Power may be revoked by me as to my Attorney-in-Fact at any time by written notice to my Attorney-in-Fact.

Dated _	may	على, 19 <u>90</u> , at Rockledge, Florida, USA.
	3	Phone (Gaz)
		Charles Read Madary 3

State of	Florida)
County of	Brevard) ss:)

On this day of 1996, before me, the undersigned, Notary Public for the State/Commonwealth of personally appeared Charles Read Madary 3 to me known (or to me proved) to be the identical person named in and who executed the above General Power of Attorney, and acknowledged that such person executed it as such person's voluntary act and deed.

My Commission expires:



Notary Public