

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 3:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # ~~512346~~
1. Corporation Name
MADONNA CORP. 512346

Principal Place of Business Making Address
% STUTZMAN & BROMBERG % ARTHUR ANDERSEN
2323 BRYAN STREET, SUITE 2200 901 MAIN STREET
DALLAS, TEXAS 75201 SUITE 5600
DALLAS, TEXAS 75202

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 09/15/76
3a. Date of Last Report 1994

2. Principal Place of Business	2a. Making Address	4. FEI Number	Applied For
21	26	75-1537923	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27	<input type="checkbox"/>	
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	28	<input type="checkbox"/>	
Zip	Country	7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
24	25	29	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATIONS SYSTEM, INC
1201 HAYES STREET
SUITE 105
TALLAHASSEE, FLORIDA 32301

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

Signature, typed or printed name of registered agent, and title if applicable.

NOTE: Registered Agent signature required when registering.

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRODOWSKI MICHAEL	1.2 NAME	
STREET ADDRESS	2323 BRYAN STREET, SUITE 2200	1.3 STREET ADDRESS	
CITY-ST-ZIP	DALLAS, TEXAS 75201	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHNSON CAROL A	3.2 NAME	
STREET ADDRESS	2323 BRYAN STREET, SUITE 2200	3.3 STREET ADDRESS	
CITY-ST-ZIP	DALLAS, TX 75201	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHOFIELD WILLIAM A	4.2 NAME	
STREET ADDRESS	2323 BRYAN STREET, SUITE 2200	4.3 STREET ADDRESS	
CITY-ST-ZIP	DALLAS, TX 75201	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(x), 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 507, Florida Statutes, and that my name appears in Block 2 or Block 13 if changed, or in an attachment with an address.

SIGNATURE *Michael Brodowski* MICHAEL BRODOWSKI, PRESIDENT

214-644-5175

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

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