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I, MARICA KANGRGA, presently residing at 519 West 143rd Street, East Chicago, Indiana, by this Power of Attorney, presently appoint my son, NEDJELKO KANGRGA, presently residing at 3926 Fir Street, East Chicago, Indiana, as my attorney-in-fact. Such attorney-in-fact, shall only be liable for actions undertaken in bad faith and shall not be entitled to a fee for services rendered, but shall be entitled to any expenses incurred and monies advanced.

I give to my attorney-in-fact and his successor, the following powers:

A. The authority to purchase, sell, exchange, convey, mortgage, lease, assign or otherwise deal with or dispose of any estate or interest in real or personal property which I possess;

B. To establish in my name or to maintain bank accounts standing in my name, individually or in a fiduciary capacity, to deposit funds therein and draw checks thereon in my behalf and to conduct any other banking transactions provided by law;

C. To receive and demand all sums of money and demands whatsoever, as are now or shall hereafter become due and payable or belonging to me;

D. Access to any safe deposit box I may have in any financial institution and to sign any instruments necessary to gain admission thereto;

E. To arrange for and pay my medical, hospital and nursing expenses, including admission to hospitals and nursing homes; to make application for insurance and health benefits;

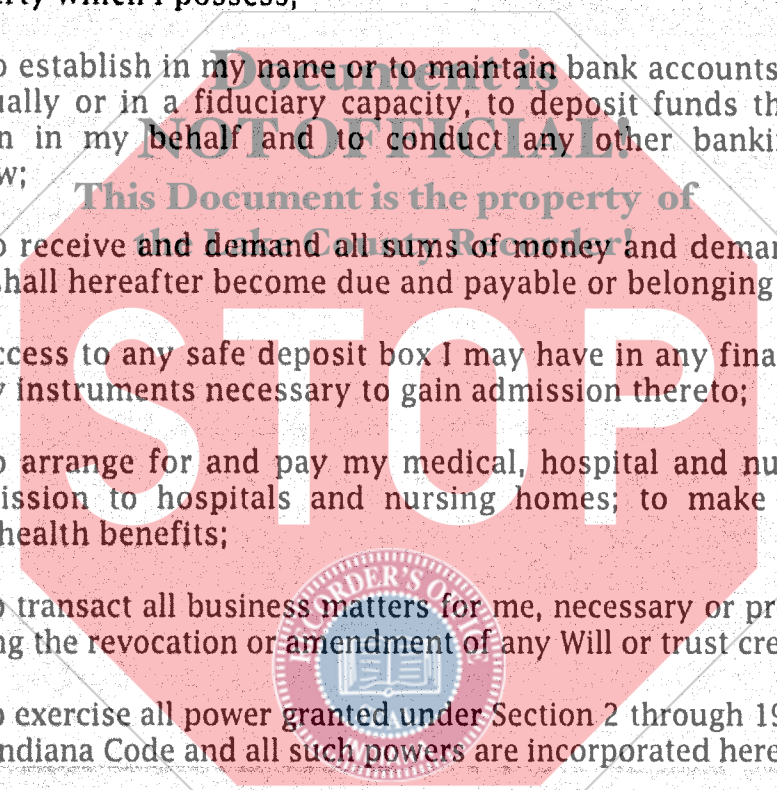
F. To transact all business matters for me, necessary or proper to be done, but not including the revocation or amendment of any Will or trust created by me;

G. To exercise all power granted under Section 2 through 19 of Chapter 5 of Title 30 of the Indiana Code and all such powers are incorporated herein by reference.

H. To execute and file federal and state tax returns, to pay such taxes and the estimates thereon; to execute on my behalf elections including the consent to gift splitting which may be permitted by law.

Any former power of attorney executed by me shall be ineffective and void from and after the execution of this power of attorney.

This power of attorney shall not be affected by my subsequent incapacity and shall be construed as a durable power of attorney and shall continue in effect until revoked or until my death, whichever occurs first.



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If any provision of this instrument shall be held unenforceable or invalid, such provision shall not affect the remaining provisions thereof which shall be enforced as if such offending provisions had not been inserted herein.

Reproduction of this executed original, with reproduced signatures and certificate of acknowledgment certified to its correctness by the attorney-in-fact or his successor shall be deemed to be original counterparts of this Power of Attorney.

IN WITNESS WHEREOF, I have hereunto set my hand this _____ day of June, 1998.

Marica Kangrga
MARICA KANGRGA

STATE OF INDIANA)
COUNTY OF LAKE)

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Before me, a Notary Public in and for said County and State came MARICA KANGRGA and acknowledged the execution of the above and foregoing Power of Attorney for the purposes therein set forth.

Witness my hand and seal this 9th day of June, 1998.

My Commission Expires: 6/14/98

Rebecca Mestrovich
REBECCA MESTROVICH, Notary Public
Residing in Lake County, Indiana



This Instrument Prepared By:
Peter Katic
Indiana Atty. No: 5080-45

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