2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P08000038579

Address:

City-St-Zip:

FILED Nov 13, 2009 Secretary of State

Entity Name: IBG TRADING, INC. **Current Principal Place of Business: New Principal Place of Business:** 1691 MICHIGAN AVE., SUITE 240 MIAMI, FL 33139 **Current Mailing Address: New Mailing Address:** 1691 MICHIGAN AVE., SUITE 240 MIAMI, FL 33139 FEI Number: 26-2607849 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROGER, MARIA E 1691 MICHIGAN AVE., SUITE 240 MIAMI, FL 33139 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition ROGER, MARIA E PR/SEC ROGER, MARIA E SEC/CEO Name: Name: 1691 MICHIGAN AVE. #240 1691 MICHIGAN AVE. #240 Address: Address:

City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139 Title: VΡ Title: VΡ () Delete (X) Change () Addition Name: WHATLEY, JOHN VP/TSR Name: WHATLEY, JOHN CFO.TSR 1691 MICHIGAN AVE. #240 1691 MICHIGAN AVE. #240 Address: Address: MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139 City-St-Zip: City-St-Zip: Title: Title: DIR () Delete () Change () Addition BODDEN, EUGENE DIR Name: Name: 1691 MICHIGAN AVE. #240 Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: Title: () Delete Title: () Change (X) Addition ANTELO, EMILIO C Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

1619 MICHIGAN AVENUE #240

MIAMI BEACH, FL 33139

SIGNATURE: MARIA E. ROGER PRES 11/13/2009