FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # **F95000004869 (2)**

1. Corporation Name
ITG INTERNATIONAL, INC.

Principal Place of Business
875 OLD ROSWELL RD #F-300
ROSWELL GA 30076

Mailing Address
875 OLD ROSWELL RD #F-300
ROSWELL GA 30076

3. Date Incorporated or Qualified: 10/06/1995
3a. Date of Last Report:

2. Principal Place of Business
21 3230 NE 13TH STREET
Suite, Apt. #, etc.: 22 202
City & State: 23 POMPANO BEACH, FLORIDA
Zip: 24 33062 Country: 25 USA

2a. Mailing Address
26 3230 NE 13TH STREET
Suite, Apt. #, etc.: 27 202
City & State: 28 POMPANO BEACH, FLORIDA
Zip: 29 33062 Country: 30 USA

4. FEI Number: 58-2125251 — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☒ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
THIAMANN, ROBERTO
1652 SAND KEY CIR
OVIEDO FL 32765

10. Name and Address of New Registered Agent
81 Name: CARLOS THIMANN
82 Street Address (P.O. Box Number is Not Acceptable): 3230 NE 13TH STREET
83 NO. 202
84 City: POMPANO BEACH FL 85 Zip Code: 33062

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: CARLOS THIMANN · DCPT 04/22/96
(Signature typed or printed name of registered agent and the date above) (NOTE: Registered Agent Signature is required when resigning) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DCPT	☐ DELETE	1.1 TITLE	DCPT	☒ Change ☐ Addition
NAME	THIAMANN, CARLOS		1.2 NAME	THIMANN, CARLOS	
STREET ADDRESS	1652 SAND KEY CIR		1.3 STREET ADDRESS	3230 NE 13TH STREET, NO. 202	
CITY-ST-ZIP	OVIEDO FL 32765		1.4 CITY-ST-ZIP	POMPANO BEACH, FL 33062	
TITLE	DCV	☐ DELETE	2.1 TITLE	D V	☒ Change ☐ Addition
NAME	GRANDE, EUGENIO		2.2 NAME	GRANDE, EUGENIO	
STREET ADDRESS	1652 SAND KEY CIR		2.3 STREET ADDRESS	3230 NE 13TH STREET, NO. 202	
CITY-ST-ZIP	OVIEDO FL 32765		2.4 CITY-ST-ZIP	POMPANO BEACH, FL 33062	
TITLE	DS	☐ DELETE	3.1 TITLE	DS	☒ Change ☐ Addition
NAME	THIAMANN, ROBERTO		3.2 NAME	THIMANN, ROBERT	
STREET ADDRESS	1652 SAND KEY CIR		3.3 STREET ADDRESS	1652 SAND KEY CIRCLE	
CITY-ST-ZIP	OVIEDO FL 32765		3.4 CITY-ST-ZIP	OVIEDO, FL 32765	
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	200001808602	☐ Change ☐ Addition
NAME			5.2 NAME	-05/06/96--01025--001	
STREET ADDRESS			5.3 STREET ADDRESS	***208.75	
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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)(k) 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: CARLOS THIMANN 04/22/96 (954) 9426171
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)