2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000019415

Entity Name: IBG CAPITAL MARKETS, L.L.C.

WHATLEY, JOHN ROBERT

NORTH MIAMI BEACH, FL 33160

3051 NE 264TH STREET

Name:

Address:

City-St-Zip:

FILED Apr 14, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:				
SUITE 240	- HIGAN AVE.) ACH, FL 331	39					
Current M	lailing Addr	ess:	New Mailing Address:				
SUITE 240	HIGAN AVE.) ACH, FL 331	39					
FEI Number	: 02-0602090	FEI Number Applied For ()	FEI Number Not App	olicable ()	Certificate of Status Desired ()	ļ.	
Name and	l Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
MIAMI, FL	CAYNE BLV 33181 U		o purpose of changing	ite registere	d office or registered agent, or b	oth	
in the State	e of Florida.	y submits this statement for the	; purpose or changing	its registere	d office of registered agent, of L	Oth	
SIGNATU	RE:						
Electronic Signature of Registered Age			gent	ent Date			
MANAGING	MEMBERS/MA	NAGERS:	ADDITIONS/CHANGES:				
Title: Name: Address: City-St-Zip:	MGR PIZZORNI, A 4760 NORTH MIAMI BEAC	BAY ROAD	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	WHATLEY, J 3051 NE 264	() Delete OHN ROBERT TH STREET II BEACH, FL 33160	Title: Name: Address: City-St-Zip:	1691 MICHI	(X) Change () Addition JOHN ROBERT GAN AVE #240 CH, FL 33139		
Title: Name: Address: City-St-Zip:	SCHUMACHE 528 MARMO		Title: Name: Address: City-St-Zip:	1691 MICHI	(X) Change () Addition IER, ALBERT GAN AVE #240 CH, FL 33139		
Title:	MGR	(X) Delete	Title:		() Change () Addition		

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Name:

Address:

City-St-Zip:

SIGNATURE: ALBERT SCHUMACHER MGR 04/14/2008