

File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY		FLORIDA DEPARTMENT OF STATE	
ANNUAL REPORT		Sandra B. Mortham	
1998		Secretary of State	
		DIVISION OF CORPORATIONS	
<b>FILING FEE</b>		<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b>	
<b>\$ 188.75</b>		<b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>	
1. Name and Mailing Address of Limited Liability Company		<b>DOCUMENT #</b> L97000000514	
INVESTORS TRADING GROUP, L.C. 12000 BISCAYNE BLVD. #212 N MIAMI FL 33181		1a. Principal Place of Business Address  12000 BISCAYNE BLVD. #212 N MIAMI FL 33181	
2. Principal Place of Business		2a. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip		Zip	
Country		Country	
3. Date Organized or Qualified		3a. State of Formation	
05/14/1997		FL	
4. FEI Number		<input type="checkbox"/> Applied For	
65-0763066		<input type="checkbox"/> Not Applicable	
5. Date of Last Report		6. Certificate of Status Desired	
		\$8.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent/Office	
COHEN, JEFFREY R 297 SUNNY ISLES BLVD. N MIAMI BEACH FL 33160		Name  Street Address (P.O. Box Number is Not Acceptable) 200002447402--3 Suite, Apt. #, etc. -03/04/98--01112--014 City ****188.75 ****188.75 FL Zip Code	
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.			
SIGNATURE _____ DATE _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)</small>			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	MARSHALL, GREGORY L	12000 BISCAYNE BLVD.	N MIAMI FL
MGR	MCGAHEY, MICHAEL	12864 BISCAYNE BLVD. #216	N MIAMI FL
11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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; and that my name appears in Block 10, or on an attachment with an address.			
SIGNATURE: <i>[Signature]</i> , CEO 2/27/98			
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER			
Date			
Daytime Phone #			

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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233