File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Katherine Harris ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 MAR - 1 AM 10: 36 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** L97000000514 INVESTORS TRADING GROUP, L.C. 1a. Principal Place of Business Address 12000 BISCAYNE BLVD. 12000 BISCAYNE BLVD. 4 808 94 AR # # # 808 N MIAMI FL 33181 N MIAMI FL 33181 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 05/14/1997 FLSuite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State 65-0763066 City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country Ζip Country 03/02/1998 \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office COHEN, JEFFREY R 297 SUNNY ISLES BLVD. Street Address (P.O. Box Number is Not Acceptable) N MIAMI BEACH FL 33160 Suite, Apt. #, etc. City 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 ____ (Registered Agent Accepting Appointment) (NOT). Registered Agent signature required when recent they 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 20002800832---2 -03/10/99--01061--017 ****188.75 ****188.75 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. Hurther 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 reported by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an

NO TYPE CORPORATED NAME OF SIGRANG MANAGING MEMBER OR MANAGED

Daylon Phote #

INHSE10 R (12-98)

attachment with an address.

SIGNATURE: