## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400033531 (2)

AMERITRADE INTERNATIONAL, INC.

1000 PHIPPEN RD 1000 PHIPPEN RD DANIA FL 33004 DANIA FL 33004-3835 3a. Date of Last Report 3. Date Incorporated or Qualified 05/04/1994 0371 /1997 4. FEI Numbor 2. Principal Place of Business 2a. Mailing Address Applied For 65-0528990 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees Zio Country Country This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Namo VALENE, NOLAN H 1000 PHIPPEN RD 82 Street Address (P.O. Box Number is Not Acceptable) DANIA FL 33004 / 63 84 City Zip Code 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. PID DELETE Change Addition TITLE 1.1 10 UE

valene, nolan h 12 NAME NAME 1000 PHIPPEN RD STREET ADDRESS 1.3 STREET ADDRESS **DANIA FL 33004** 1.4 CHY - ST - ZIP CITY - ST - ZIF Change DELETE Addition TITLE 2.1 JULE NAME 22 NAME 2.3 STRELL ADDRESS STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST - 7IP DELETE Change Addition 3.1 11111 TITLE NAME 3.2 NAME 3 3 STREET ADDRESS STREET ADDRESS 3 4. CITY - ST - ZIP CITY-ST-ZIP DELETE Change TIFLE 4.1 TITLE Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - 7IP CITY-ST-ZIP DELETE Change Addition 5.1 1DLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5 4 CHY-ST-7/P CITY-ST-ZIP 30000254134<sup>3</sup>Change -05/29/98--01099--049 ( DELETE 6.1 1ITLE Addition TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS \*\*\*150.00

14. I do hereby certify that the information supplied with this flong does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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 eath; that I am an officer or director of the corporation or the receiver or frustee 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 appears.

No William

4/27/90 001 000 0184

FILED

May 28 1998 8:00am

Secretary of State