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 # **S58187** **(3)**

1. Corporation Name

INTERACTIVE BROKERAGE GROUP, INC.

Principal Place of Business
2583 SPLITWOOD WAY
SUITE 240
CLEARWATER FL 34621
US

Mailing Address
P O BOX 14056
SUITE 240
CLEARWATER FL 34629-056
US

3. Date Incorporated or Qualified: 06/05/1991
3a. Date of Last Report: 04/17/1995

2. Principal Place of Business
21 2583 SPLITWOOD WAY
Suite, Apt. #, etc.
22
City & State
23 CLEARWATER FL
Zip 24 34621 Country 25 US

2a. Mailing Address
26 P.O. BOX 14056
Suite, Apt. #, etc.
27
City & State
28 CLEARWATER FL
Zip 29 34629-4056 Country 30 US

4. FEI Number: 59-3072282 ☐ 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

RAPTOULIS, STEPHAN G.
2583 SPLITWOOD WAY
CLEARWATER FL 34621

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Signature, typed or printed name and title of signer (see instructions) (NOTE: Registered Agent signature required after incorporation) DATE 2/26/96

12. OFFICERS AND DIRECTORS

TITLE	PST	☐ DELETE
NAME	RAPTOULIS, STEPHAN G	
STREET ADDRESS	2583 SPLITWOOD WAY	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	D	☐ DELETE
NAME	RAPTOULIS, STEPHAN G.	
STREET ADDRESS	2503 SPLITWOOD WAY	
CITY-ST-ZIP	CLEARWATER FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
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: PRESIDENT — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 2/26/96 Daytime Phone # (813) 799-0489

CR2E034 (12/95)