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

FILED Mar 23 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (3)S58187 INTERACTIVE BROKERAGE GROUP, INC. Principal Place of Business Mailing Address 2583 SPLITWOOD WAY P O BOX 14056 **CLEARWATER FL 34621** CLEARWATER FL 34629-056 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/05/1991 2. Principal Place of Business 2a. Mailing Address Applied For 21 59-3072282 Not Applicable 26 Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution 28 Added to Fees ^{Zip} 33761 Country Country 8. This corporation owes or has paid the current year Intangible 29 33766-4056 30 Yes Personal Property Tax due June 30. □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RAPTOULIS, STEPHAN G. 2583 SPLITWOOD WAY Street Address (P.O. Box Number is Not Acceptable) **CLEARWATER FL 34621** 83 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or p e of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE NAME RAPTOULIS, STEPHAN G 12 NAME CRZE034 2583 SPLITWOOD WAY STREET ADDRESS 1.3 STREET ADDRESS **CLEARWATER FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE RAPTOULIS, STEPHAN G. NAME 2.2 NAME STREET ADDRESS 2503 SPLITWOOD WAY 2.3 STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 2. 4 CITY-ST-ZIP DELETE Change ■ Addition TITLE 31 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP

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 ar officer or director of the corporation or the receiver or pustee 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 or an attachment with an address. SIGNATURE: BIGINATURE AND TY

6.1 TRLE 6.2 NAME

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes, I further certify that the information

Change

Addition

DELETE

TITLE

NAME STREET ADDRESS