

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # S58187

1. Entity Name

INTERACTIVE BROKERAGE GROUP, INC.



Principal Place of Business

2583 SPLITWOOD WAY
CLEARWATER FL 33761
US

Mailing Address

P O BOX 14056
CLEARWATER FL 33766-4056
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE CR2E034 (11/03)

4. FEI Number 59-3072282

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RAPTOULIS, STEPHAN G.
2583 SPLITWOOD WAY
CLEARWATER FL 33761

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PST
NAME RAPTOULIS, STEPHAN G.
STREET ADDRESS 2583 SPLITWOOD WAY
CITY - ST - ZIP CLEARWATER FL 33761 ☐ Delete

TITLE D
NAME RAPTOULIS, STEPHAN G.
STREET ADDRESS 2503 SPLITWOOD WAY
CITY - ST - ZIP CLEARWATER FL 33761 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
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CITY - ST - ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition
000000044974
02/11/04-80044-002 150.00

TITLE
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STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHAN G. RAPTOULIS PRES 7 FEB 04 (727) 799-6261
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #