DOCUMENT # F98000002138  1. Entity Name TOORICUM LTD., INC.					t	Territoria				
						•				
						00 FEB 21 AM	8: 28			
Principal Place of Business  805 EAST HOINSON ST  STE 400  ORLANDO FL 32801		Mailing Address  605 EAST RONGON OF N SAV 57  STE 400  ORLANDO FL 32801  -UK U.S.A.				SECRETA A STATE TALLAHASSEE, FLORIDA				
Principal Place of Business     3. Mailing Address										
Suite, Apt. #, etc. Suite, Apt. #, etc.						DO NOT W	RITE IN THIS S	PACE	,	
City & State	9	City & State	City & State			FEI Number 59-3495	257	_ <del>                                    </del>	plied For t Applicable	
Zip	Country	. Zip	Coun	try	5. (	Certificate of Status Desire		8.75 Addi ee Required		
	6. Name and Address of Curren	t Registered Agent		Name	7. N	lame and Address of Ne	w Registered A	gent		
OUTNOW LIBAY B										
SHENOY, UDAY P 605 EAST ROBINSON STREET				Street Address (P.O. Box Number is Not Acceptable)						
SUITE 400										
ORLANDO FL 32801				City FL Zip Code						
8. The above	named entity submits this statement	for the purpose of changing its	s registere	ed office or	registered age	ent, or both, in the State of	Florida.	.78-	4	
SIGNATURE .	Signature, typed or printed name of registered agei			_	re required when re	-02/2	5/0001 <del>163.75</del>	1050	30	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  FILE NOW!!  After MAY 1, 200  Make Check Payable				will be \$5	50.00	10. Election Campaign Trust Fund Contribu	- 1		O May Be to Fees	
11.	OFFICERS ANI		12.		AD	DITIONS/CHANGES TO	OFFICERS AND			
TITLE NAME STREET ADDRESS	t reactor to contract reacts			e E Et address		N STREET	· ENGLAN	Change	☐ Addition	
CITY-ST-ZIP	ENGLAND WIY 3LJ ->	<u> </u>		-ST-ZIP	LONDO	N WIY T.DS	· EIARCVE	Change	Addition	
NAME ,	D Ansar, Erika	Delete	TITLI NAM					Change	☐ Abdition	
STREET ADDRESS	S <del>- Enpro, 7 old park lane &gt;</del>			ET ADDRESS -ST-ZIP	T DOWN STREET LONDON WIY 7 DS ENGLAND					
TITLE	EV	Delete	TITL		67.0	NY 7 DS	1 1 1 1 1 1	1 Change	Addition	
NAME	SHENOY, UDAY P		NAM			- 400 <u>00</u> 3		##G0	14	
STREET ADDRESS CITY-ST-ZIP	000 2 101 11021110011 011121 00112 100			ET ADDRESS - ST-ZIP		****	J do Çoe i		0.00 🐰	
TITLE	VS		TITL					Change	☐ Addition	
NAME	ANSAR, HANAH		NAM							
STREET ADDRESS CITY-ST-ZIP	-ENPRO, 7 OLD PARK LANE > -ENGLAND WIY-3LJ>	•	•	ET ADDRESS -ST-ZIP	LON DO	N STREET N WIY 7DS	ENGLAN	Q.		
TITLE	VS	☐ Delete	TITL	E			<u>-</u>	<b>∑</b> Change	☐ Addition	
NAME STREET ADDRESS	RUSHD, ASAD A		NAM	ie Eet address i	<b>.</b>	. 57051-				
STREET ADDRESS CITY-ST-ZIP	ENPRO, 7 OLD PARK LANE > ENGLAND WIY SLJ>	•		-ST-ZIP	7 DOW		ENGLA	U.D		
TITLE	/	☐ Delete	TITL	E	<del></del>	/		☐ Change	☐ Addition	
NAME			NAM	ie eet address =			TS			
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP						
13. I hereby of indicated	certify that the information supplied wi	th this filing does not qualify for	or the exe	mption stat	ed in Section	119.07(3)(i), Florida Statut legal effect as if made und	es. I further cert ler oath: that I a	ify that the in m an officer	ntormation or director	

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under oath; that if an affilier of 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Description of the printed hame of Signing Officer or Director

2000 UNIFORM BUSINESS REPORT (UBR)