

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000070841

1. Entity Name

LORIOT TRADING INTERNATIONAL, INC.

*r*

**FILED**  
**Jul 26, 2000 8:00 am**  
**Secretary of State**

07-26-2000 90003 036 \*\*\*150.00

Principal Place of Business

7915 SUMMER RIDGE PLACE  
ORLANDO FL 32819

Mailing Address

7915 SUMMER RIDGE PLACE  
ORLANDO FL 32819

2. Principal Place of Business

*7915 Summer Ridge Pl*

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

*Orlando Florida*

City & State

*Orlando Florida*

4. FEI Number

*59-3594633*

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE



Zip  
*32819*

Country  
*USA*

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

DE ROUVRAY, BRUNO LORIOT  
7915 SUMMER RIDGE PLACE  
ORLANDO FL 32819

7. Name and Address of New Registered Agent

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒

**FILE NOW!!! FEE IS \$550.00 ~~\$150~~**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	LORIOT DE ROUVRAY, BRUNO	
STREET ADDRESS	7915 SUMMER RIDGE PLACE	
CITY-ST-ZIP	ORLANDO FL 32819	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*07/11/2000*

*407-301-7832*

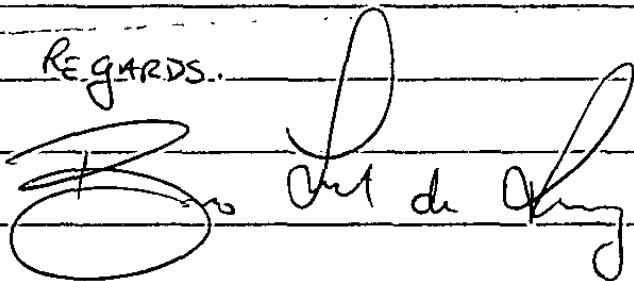
ATTACHMENT  
DU073766

This is the first letter of this  
kind that I received. After calling  
your ~~office~~ 850-488-9000 number,  
I was told to send a check for \$150.00  
and explain the situation to I.C. I never received  
your first letter.

I hope that this has satisfactorily addressed  
the issue.

Feel free to call me @ 3407-301-7832 should you  
have any questions.

BEST REGARDS.



BRUNO LORIENT DE ROUVRAY  
LORIENT TRADING INTERNATIONAL, PRESIDENT