

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90332 008 ***150.00

DOCUMENT # P990000098630

1. Entity Name

ORLANDO TRADING, INC.

Principal Place of Business

**423 W. VINE STREET
KISSIMMEE FL 34741**

Mailing Address

**5329 FLYING EAGLE LANE
KISSIMMEE FL 34746**

11035743



2. Principal Place of Business

3501- West vine st

Suite, Apt. #, etc.

322-B

3. Mailing Address

P.O. Box 692704

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

KISSIMMEE, FL

City & State

ORLANDO, FL

4. FEI Number

59-3622255Applied For
Not Applicable

Zip

34741

Country

USA

Zip

32869

Country

USA5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

8. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ANSARI, FAREED
423 W. VINE STREET
KISSIMMEE FL 34741**

Name

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

City

FL

Zip Code

8. The above named entity submits this document 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, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-25-029. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	D		<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Additio
	ANSARI, FAREED						
	423 W. VINE STREET						
	KISSIMMEE FL 34741						
	V		<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Additio
	AZHAR, MOHAMMAD						
	5329 FLYING EAGLE LANE						
	KISSIMMEE FL 34746						
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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.