

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State

03-28-2005 90081 031 ****61.25

DOCUMENT # 766149 1. Entity Name GRAND LODGE OF FREE MASONS OF THE ANTILLES INC					
Principal Place of Business 1883 S.W. 1ST STREET, FIRST FLOOR MIAMI, FL 33135			Mailing Address 1883 S.W. 1ST STREET, FIRST FLOOR MIAMI, FL 33135		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-1981904	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent BENITEZ, JUAN 8345 SW 54 ST., STE A MIAMI, FL 33155				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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$81.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RODRIGUEZ, PABLO N <input checked="" type="checkbox"/> Delete 3024 SW 5 ST. MIAMI, FL 33135		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SAN ROMAN, MANUEL <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4311 SW 97 PL MIAMI FL 33145	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SARDINA, PEDRO <input type="checkbox"/> Delete 5501 NW 7 ST. #E311 MIAMI, FL 33126		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TO GUERRA, HELDOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3901 SW 19 TER MIAMI FL 33145	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TO SAN ROMAN, MANUEL <input checked="" type="checkbox"/> Delete 4311 SW 97 PLACE MIAMI, FL 33155		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TO GUERRA, HELDOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3901 SW 19 TER MIAMI FL 33145	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TO SAN ROMAN, MANUEL <input type="checkbox"/> Delete 4311 SW 97 PLACE MIAMI, FL 33155		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TO GUERRA, HELDOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3901 SW 19 TER MIAMI FL 33145	
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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 617, 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: <u>Manuel San Roman</u> 4-10-05 205-269-4141 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

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