

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005710

FILED  
Apr 30, 2012  
Secretary of State

**Entity Name:** UNITED FREE MASONS OF THE WORLD INC.

**Current Principal Place of Business:**

1100 NE 125 STREET  
SUITE #105  
MIAMI, FL 33167 US

**New Principal Place of Business:**

**Current Mailing Address:**

1100 NE 125 STREET  
SUITE #105  
MIAMI, FL 33167 US

**New Mailing Address:**

**FEI Number:** 65-0869065

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DOCTEUR, DALES  
8025 NW 198 TERR  
MIAMI, FL 33015 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MICHEL, AROL J  
Address: 737 NE 127 STREET  
City-St-Zip: MIAMI, FL 33167

Title: V  
Name: SIMON, LOUIS-GEORGES  
Address: 1100 NE 125TH STREET  
City-St-Zip: MIAMI, FL 33161

Title: T  
Name: BAPTISTE, JEAN CLAUDE J  
Address: 6304 NW 1ST PLACE  
City-St-Zip: MIAMI, FL 33150

Title: S  
Name: DIEUDONNE, LOUICIN  
Address: 4200 NW 88TH AVENUE APT 211  
City-St-Zip: SUNRISE, FL 33351

Title: V  
Name: JOSEPH, THOMAS  
Address: 1190 NW 124 STREET  
City-St-Zip: N MIAMI, FL 33168

Title: D  
Name: ALCINDOR, ANTOINE C  
Address: 12730 NW 18 COURT  
City-St-Zip: MIAMI, FL 33167

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DALES DOCTEUR

RA

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date