2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0100006005

Entity Name: CUBAN LIBERTY COUNCIL, INC.

FILED Jan 10, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

701 SW 27TH AVE N 820 MIAMI, FL 33135

New Mailing Address: Current Mailing Address:

701 SW 27TH AVE N 820 MIAMI, FL 33135

FEI Number: 31-1800198 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ZUNIGA, LUIS 465 WEST PARK DR. MIAMI, FL 33172 US

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:

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

Electronic Signature of Registered Agent Date

MIAMI, FL 33172

465 WEST PARK DR.

MIAMI, FL 33172

ZUNIGA, LUIS

() Delete

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS: (X) Change () Addition () Delete GARCIA, HORACIO GARCIA, HORACIO Name: Name: 465 WEST PARK DR. Address: 6850 RIVIERA DRIVE Address: City-St-Zip: MIAMI, FL 33172 City-St-Zip: CORAL GABLES, FL 33146 Title: VD Title: (X) Change () Addition () Delete HERNANDEZ, ALBERTO Name: HERNANDEZ, ALBERTO Name: Address: 465 WEST PARK DR. Address: 2695 LE JEUNE ROAD City-St-Zip: MIAMI, FL 33172 City-St-Zip: CORAL GABLES, FL 33134 Title: VD. () Delete Title: VD (X) Change () Addition SUAREZ, DIEGO Name: SUAREZ, DIEGO Name: 465 WEST PARK DR. Address: Address: 3690 NW 62 STREET City-St-Zip: MIAMI, FL 33172 City-St-Zip: MIAMI, FL 33147 (X) Change () Addition Title: TD () Delete Title: TD Name: FOYO, FELICIANO Name: FOYO, FELICIANO 465 WEST PARK DR. Address: Address: 5915 GRANADA BOULEVARD City-St-Zip: MIAMI, FL 33172 City-St-Zip: CORAL GABLES, FL 33146 Title: () Delete Title: SD (X) Change () Addition SANCHEZ, IGNACIO SANCHEZ, IGNACIO Name: Name: 465 WEST PARK DR.

1200 NINETENTH STREET, NW Address:

City-St-Zip: WASHINGTON, DC 20036

Title: () Change () Addition

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: LUIS ZUNIGA **VSD** 01/10/2005