2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2005
Secretary of State

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Entity Name: EJERCITO LIBERTADOR INC.

Current Principal Place of Business:

LAW OFFICES OF PEDRO J FUENTES-CID PA
2650 BISCAYNE BLVD.
MIAMI, FL 33137

New Principal Place of Business:

LAW OFFICES OF PEDRO J. FUENTES-CID, PA
2650 BISCAYNE BOULEVARD
MIAMI, FL 33137 US

Current Mailing Address:

LAW OFFICES OF PEDRO J FUENTES-CID PA
2650 BISCAYNE BLVD.
MIAMI, FL 33137

New Mailing Address:

LAW OFFICES OF PEDRO J. FUENTES-CID, PA
2650 BISCAYNE BOULEVARD
MIAMI, FL 33137 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PEDRO J. FUENTES-CID, P.A.
2650 BISCAYNE BLVD.
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

PEDRO J. FUENTES-CID, P.A.
2650 BISCAYNE BOULEVARD
MIAMI, FL 33137 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: PEDRO J. FUENTES-CID 01/04/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: FUENTES-CID, PEDRO J
Address: 2650 BISCAYNE BLVD.
City-St-Zip: MIAMI, FL 33137

Title: D ( ) Delete
Name: PEREZ, ROBERTO M
Address: 2650 BISCAYNE BLVD.
City-St-Zip: MIAMI, FL 33137

Title: D ( ) Delete
Name: GONZALEZ, JOSE J
Address: 2650 BISCAYNE BLVD.
City-St-Zip: MIAMI, FL 33137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: FUENTES-CID, PEDRO J
Address: 2650 BISCAYNE BOULEVARD
City-St-Zip: MIAMI, FL 33137 US

Title: D (X) Change ( ) Addition
Name: PEREZ, ROBERTO M
Address: 2650 BISCAYNE BOULEVARD
City-St-Zip: MIAMI, FL 33137 US

Title: D (X) Change ( ) Addition
Name: GONZALEZ, JOSE L
Address: 2650 BISCAYNE BOULEVARD
City-St-Zip: MIAMI, FL 33137 US

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: PEDRO J. FUENTES-CID D 01/04/2005
Electronic Signature of Signing Officer or Director Date