2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# N04000004881

Entity Name: MONUMENTO AL PRESO POLITICO DESCONOCIDO, INC.

Current Principal Place of Business:

8250 W. FLAGLER STREET
116
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

8250 W. FLAGLER STREET
116
MIAMI, FL 33144

New Mailing Address:

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

Name and Address of Current Registered Agent:

ANCHETA, EVELIO P
6015 SW 112 CT
MIAMI, FL 33173 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 ( ) Delete
Name: ANCHETA, EVELIO P
Address: 6015 SW 112 CT
City-St-Zip: MIAMI, FL 33173

Title: V ( ) Delete
Name: QUINTANA, JUSTO G
Address: 8250 W. FLAGLER STREET SUITE 116
City-St-Zip: MIAMI, FL 33144

Title: S ( ) Delete
Name: BISMARCK, ROBERTO M
Address: 8250 W. FLAGLER STREET SUITE 116
City-St-Zip: MIAMI, FL 33144

Title: T ( ) Delete
Name: BISMARCK, ROBERTO M
Address: 8250 W. FLAGLER STREET SUITE 116
City-St-Zip: MIAMI, FL 33144

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: EVELIO ANCHETA P 04/29/2005

Electronic Signature of Signing Officer or Director — Date