

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 23, 2005 08:00 AM
Secretary of State

DOCUMENT # N93000004661

1. Entity Name

COORDINADORA INTERNACIONAL DE
EX-PRISIONEROS POLITICOS CUBANOS, INC.



Principal Place of Business

13975 SW 9TH ST
MIAMI, FL 33184 US

Mailing Address

13975 SW 9TH ST
MIAMI, FL 33184 US

DO NOT WRITE IN THIS SPACE



05082005 No Chg-NP

CR2E037 (10/03)

4. FEI Number

65-0444139

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CARRERA, EDDY
13975 SW 9TH ST
MIAMI, FL 33184

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	RODRIGUEZ, REYNALDO
STREET ADDRESS	16900 CHATSWORTH ST., #203
CITY-ST-ZIP	GRANADA HILLS, CA 91344
TITLE	DS
NAME	CARRERA, EDDY
STREET ADDRESS	13975 SW 9TH ST
CITY-ST-ZIP	MIAMI, FL 33184
TITLE	DVP
NAME	FLORES, JULIO
STREET ADDRESS	408 43RD STREET
CITY-ST-ZIP	UNION CITY, NJ 07087
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1100000367825
05/23/05-80001-005 61.25

**DO NOT WRITE
IN THIS SPACE**

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:

Eddy Carrera

EDDY CARRERA

05/18/2005

305-227-7789

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #