

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 16, 2005 8:00 am
Secretary of State

05-02-2005 90982 025 ***158.75
06-16-2005 90001 026 *****8.75

DOCUMENT # P04000146642

1. Entity Name
EL PROYECTO LIBERTAD, INC.



Principal Place of Business

**8330 NW 58 ST
MIAMI, FL 33166**

Mailing Address

**8330 NW 58 ST
MIAMI, FL 33166**

40088325

2. Principal Place of Business

3190 S. W. 123 Court

Suite, Apt. #, etc.

3. Mailing Address

3190 S.W. 123 Court

Suite, Apt. #, etc.

04262005

Chg-P

CR2E034 (10/03)

City & State

Miami, Fla.

City & State

Miami, Fla.

4. FEI Number

APPLIED FOR

Applied For

Not Applicable

Zip

33175-2251

Country

Condado Dade

Zip

33175-2251

Country

Condado Dade

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CASTRO, IGNACIO
8330 NW 58 ST
MIAMI, FL 33166**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **PTD** ☐ Delete
NAME **CASTRO, IGNACIO**
STREET ADDRESS **8330 NW 58 ST**
CITY-ST-ZIP **MIAMI, FL 33166**

TITLE **VPSD** ☐ Delete
NAME **BORREGO, JORGE**
STREET ADDRESS **1604 VIA PALERMO**
CITY-ST-ZIP **MONTEBELLO, CA 90640**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

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 607, Florida Statutes; and that my name appears in Block 10 or Block 11, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ignacio Castro

4/29/05