

Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

Form **990-EZ**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

2009

- ▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.
- ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2009 calendar year, or tax year beginning _____, **and ending** _____

B Check if applicable:	Please use IRS label or print or type. See Specific Instructions.	C Name of organization ALIANZA NACIONAL CONSTITUCIONALISTA	D Employer identification number 26-3399558
<input type="checkbox"/> Address change		Number and street (or P O box, if mail is not delivered to street address) Room/suite	E Telephone number
<input type="checkbox"/> Name change		2440 CORAL WAY	
<input type="checkbox"/> Initial return		City or town, state or country, and ZIP + 4	F Group Exemption Number ▶
<input type="checkbox"/> Termination		MIAMI FL 33145	
<input type="checkbox"/> Amended return			
<input type="checkbox"/> Application pending			

● **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

G Accounting method Cash Accrual
Other (specify) ▶

I Website: ▶ **N/A**

J Tax-exempt status (check only one) — 501(c) (**3**) ◀ (insert no) 4947(a)(1) or 527

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **2,000**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

	1 Contributions, gifts, grants, and similar amounts received	1	2,000
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	
	4 Investment income	4	
	5a Gross amount from sale of assets other than inventory	5a	
	b Less cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	a Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
	b Less direct expenses other than fundraising expenses	6b	
	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	
	7a Gross sales of inventory, less returns and allowances	7a	
	b Less cost of goods sold	7b	
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8 Other revenue (describe _____)	8	
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	2,000
Expenses	10 Grants and similar amounts paid (attach schedule)	10	
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	
	13 Professional fees and other payments to independent contractors	13	1,386
	14 Occupancy, rent, utilities, and maintenance	14	
	15 Printing, publications, postage, and shipping	15	
	16 Other expenses (describe ▶ See Statement 1)	16	1,300
	17 Total expenses. Add lines 10 through 16	17	2,686
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-686
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	925
20 Other changes in net assets or fund balances (attach explanation)	20		
21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	239	

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II)

		(A) Beginning of year		(B) End of year
22 Cash, savings, and investments		925	22	239
23 Land and buildings			23	
24 Other assets (describe ▶ _____)			24	
25 Total assets		925	25	239
26 Total liabilities (describe ▶ _____)		0	26	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)		925	27	239

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2009)

9-9 3

Part V Other Information (Note the statement requirements in the instructions for Part V.)

		Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		X
34 Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of the changes	34	X	
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		X
37a Enter amount of political expenditures, direct or indirect, as described in the instr. ▶ 37a _____	37a		
b Did the organization file Form 1120-POL for this year?	37b		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		X
b If "Yes," complete Schedule L, Part II and enter the total amount involved ▶ 38b _____	38b		
39 Section 501(c)(7) organizations Enter:			
a Initiation fees and capital contributions included on line 9 ▶ 39a _____	39a		
b Gross receipts, included on line 9, for public use of club facilities ▶ 39b _____	39b		
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ _____ ; section 4912 ▶ _____ , section 4955 ▶ _____			
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____			
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ▶ _____			
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		X
41 List the states with which a copy of this return is filed ▶ <u>None</u>			
42a The organization's books are in care of ▶ Horacio Garcia Sr Telephone no ▶ _____ 60 Edgewater Dr Located at ▶ Coral Gables, FL ZIP + 4 ▶ 33133			
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	42b		X
c At any time during the calendar year, did the organization maintain an office outside of the U.S. ? If "Yes," enter the name of the foreign country. ▶ _____	42c		X
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ <input type="checkbox"/> 43 _____			
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44		X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		X

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		<input checked="" type="checkbox"/>
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		<input checked="" type="checkbox"/>
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<input checked="" type="checkbox"/>
49a Did the organization make any transfers to an exempt non-charitable related organization?		<input checked="" type="checkbox"/>
b If "Yes," was the related organization a section 527 organization?		
49b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				

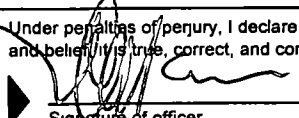
f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000 ▶ _____

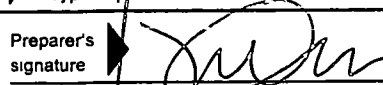
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here  Date 8/24/10

Signature of officer: **Horacio Garcia Sr.** Date: **President**

Type or print name and title

Paid Preparer's Use Only

Preparer's signature:  Date: **07/25/10** Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: **CANTERA & ASSOCIATES, INC.**
2300 CORAL WAY, SUITE 200
MIAMI, FL 33145-3511

Preparer's Identifying Number (See instr.): **P00169114**

EIN: **59-1154122**

Phone no: **305-856-0056**

May the IRS discuss this return with the preparer shown above? See instructions ▶ Yes No

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2009

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization

ALIANZA NACIONAL CONSTITUCIONALISTA

Employer identification number

26-3399558

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state.
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III—Functionally integrated
 - d Type III—Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**.
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box.
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")				5,375	2,000	7,375
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3				5,375	2,000	7,375
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						7,375

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4				5,375	2,000	7,375
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on					0	
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						7,375
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input checked="" type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a 33 1/3 % support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3 % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

Federal Statements

Statement 1 - Form 990-EZ, Part I, Line 16 - Other Expenses

<u>Description</u>	<u>Amount</u>
Expenses	\$
Contributions	<u>1,300</u>
Total	<u>\$ 1,300</u>

Statement 2 - Form 990-EZ, Part III - Organization's Primary Exempt PurposeDescription

The organization's mission is to assist the Cuban people toward the attainment of a democratic government through education in the virtues and advantages of a democratic government; the development of a democratic system with free elections and assistance in the reconstruction of Cuba following the end of communism.

Statement 3 - Form 990-EZ, Part III, Line 31 - Statement of Program Service AccomplishmentsDescription

The organization's purpose is to promote a free and democratic government in Cuba through education of democratic principles, observance of human rights and freedom. The organization received contributions in the amount of \$2,000 and in turn contributed \$1,300 to "M.A.R. pr Cuba" (\$1,000), an organization dedicated to the promotion of freedom and democracy in Cuba; and "Casa del Preso" (\$300) an organization dedicated the fight for the freedom of Cuban Political Prisoners.

ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF
ALIANZA NACIONAL CONSTITUCIONALISTA, INC
A NON-PROFIT CORPORATION.
N08000008717

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2009 JUL -9 PM 1:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Non-Profit Corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Article No. 3 (g) is hereby amended to read as follows:

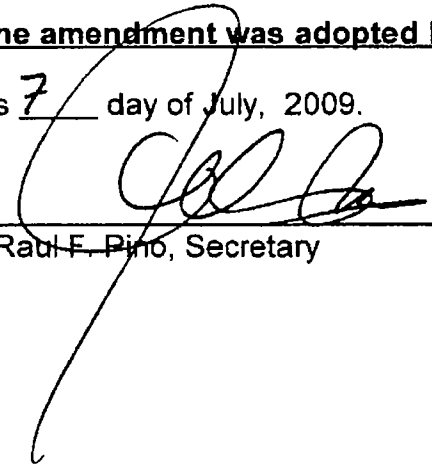
The purposes for which the ALIANZA NACIONAL CONSTITUCIONALISTA, INC, is organized are exclusively patriotic, civic, charitable, scientific, literary and educational within the meaning of Section 501 (c) (3) of the Internal Revenue Code of 1986 or the corresponding provision of any future United States Internal Revenue law.

THIRD: The date of each amendment's adoption: July 7, 2009.

FOURTH: Adoption of Amendment(s).

The amendment was adopted by the board of directors & the members.

Signed this 7 day of July, 2009.

Signature: 
Raul F. Pino, Secretary

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2008 SEP 17 AM 10:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION
OF
ALIANZA NACIONAL CONSTITUCIONALISTA, INC.

A NON-PROFIT CORPORATION**

We, the undersigned, acting as incorporators of a Corporation pursuant to Chapters 617, Part I, of the Florida Statutes, adopt the following Articles of Incorporation of such corporation:

ARTICLE I- NAME.

The name of this corporation shall be

ALIANZA NACIONAL CONSTITUCIONALISTA, INC

hereafter referred to as the "Corporation";

ARTICLE II-DURATION

This Corporation shall have perpetual existence.

ARTICLE III-CORPORATE PURPOSE

The purpose for which the Corporation is organized are:

- a. To promote the development of a democratic system of government in Cuba.
- b. To promote free and democratic elections in Cuba.
- c. To educate the Cuban people of the advantages and virtues of a democratic type of government.
- d. To promote respect for human rights and the dignity of all persons independent of race, religious, creed, sex, ethnic origin, or political beliefs, to monitor and denounce human rights abuses.
- e. To assist the Cuban people toward the attainment of a free and democratic government.
- f. To assist the Cuban people in the reconstruction of Cuban following the end of communism by peaceful means.
- g. The purposes for which the **ALIANZA NACIONAL CONSTITUCIONALISTA, INC**, is organized are exclusively patriotic, political civic, charitable, scientific, literary and educational within the meaning

of Section 501 (c) (3) of the Internal Revenue Code of 1986 or the corresponding provision of any future United States Internal Revenue law.

h. Notwithstanding any provision of these articles, this organization, shall not carry on any activities not permitted to be carried on by an organization exempt from Federal income Tax under Section 501 (c) (3) of the Internal Revenue Code of 1986 or the corresponding provision of any future United States Internal Revenue law.

i. Upon dissolution of the organization, assets shall be distributed for one or more exempt purposes withing the meaning of section 501 (c) (3) of the Internal Revenue Code of 1986, or corresponding section of any future Federal tax code, or shall be distributed to the federal, state or local government for a public purpose. Any such assets not so disposed of shall be disposed of by a court of competent jurisdiction, in the county in which the principal office of the organization is then located, exclusively for such purposes.

ARTICLE IV-MEMBERSHIP

Any natural person or legal entity interested in the objectives of the Corporation shall be eligible for membership as provided in the by laws.

Categories of membership, admission procedures, dues, and other benefits or requirements shall be prescribed and clearly defined in the bylaws and shall include, but by no means be restricted to:

- a. General or voting members who are natural persons or legal entities; and
- b. Affiliated associations of regional group memberships;
- c. Special memberships as may from time to time be considered appropriate;

and

d. Natural persons, legal entities, affiliated associations and other categories of memberships shall be entitled to vote on elective issues based on equitable formulas prescribed and defined in the Directors' Rules.

ARTICLE V-BOARD OF DIRECTORS.

The elections of directors shall be in the by laws.

The number of Directors which shall constitute the whole Board shall be 3, or such as from time to time shall be fixed by the bylaws, but in no event shall be less than three (3).

The names and addresses of the persons who are to serve as initial directors of this Corporation are as follows:

Horacio Garcia Sr. - 60 Edgewater Dr, Unit 15C, Coral Gables, Fl 33133

Luis Zuniga - 465 West Park Dr, # 9, Miami, Florida 33172 .

Raul F. Pino, Esq - 2440 Coral Way, Miami, Florida 33145

ARTICLE VI- OFFICERS

The initial officers of the corporation shall be:

Horacio Garcia Sr. -President and Director

Luis Zuniga -Vice-President and Director

Raul F. Pino -Secretary, Treasurer and Director

ARTICLE VII- INITIAL REGISTERED OFFICE AND REGISTERED AGENT.

The street address of the initial registered office of this corporation shall be:

2440 Coral Way, Miami, Florida 33145.

Principal address is same as registered.

The initial registered agent of this Corporation shall be:

Raul F. Pino who shall accept service of process within this State, at such address, and shall serve in such capacity until his successor is selected and duly designated.

ARTICLE VIII- INCORPORATOR.

The names and addresses of the person who is going to be the incorporator of this Corporation is as follows:

Raul F. Pino
2440 Coral Way
Miami, Florida 33145



Raul F. Pino.

ARTICLE IX- GENERAL.

All income and assets of the Corporation, above necessary expenses, shall be administered solely and exclusively for the corporate purposes consistent with these Articles which are selected by the Board of Directors.

This Corporation shall have no capital stock and shall pay no dividends to its incorporators, directors, officers or members, In addition, no part of the income of the Corporation shall be distributed to its members, directors, officers or incorporators; provided that the Corporation may pay compensation in a reasonable amount to its members, directors, officers, and employees for services rendered and may confer benefit upon its members in conformity with its purposes.

ARTICLE X- NO PECUNIARY GAIN.

The Corporation shall not, incidentally or otherwise, afford or pay any pecuniary gain or remuneration to its members, directors, or officers as such, and no part of the net income or net earnings of the Corporation shall, directly or indirectly, be distributable to or to otherwise inure to the benefit of any member, director, or officer of, or any other person having a personal and private interest in the activities of the Corporation; provided, however, that the Corporation may pay reasonable compensation for services rendered and property and supplies furnished to the Corporation in furtherance of its purposes described in Article II hereof.

ARTICLE XI- NO PERSONAL LIABILITY

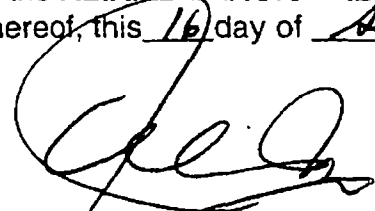
Members, directors, and officers of the Corporation shall not be personally liable for the payment of any debts or obligations of the Corporation of any nature whatsoever, nor shall any of the property of the members, directors, and officers be subject to the payment of the debts or obligations of the Corporation to any extent whatsoever.

ARTICLE XII- DISSOLUTION OF CORPORATION

The Board of Directors may dissolve this Corporation with the prior approval of two-thirds (2/3) majority vote of the general voting membership; provided that notice of purpose for the meeting has been furnished in writing to each voting member of the Corporation at least ten (10) days prior to the meeting where the vote for dissolution shall take place.

EXECUTION BY THE INCORPORATORS.

IN WITNESS WHEREOF, the undersigned have hereunto set their hands and seals on the foregoing Articles of Incorporation of the **ALIANZA NACIONAL CONSTITUCIONALISTA, INC**, as incorporators hereof, this 16 day of September 2008.

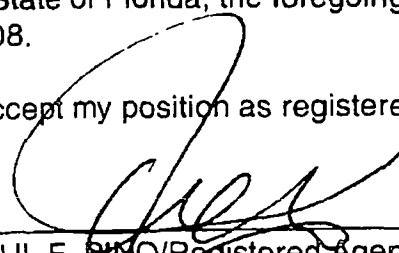


Raul F. Pino

ACKNOWLEDGMENT OF ONE INCORPORATOR

IN WITNESS WHEREOF, Raul F. Pino, the Incorporator hereof, has hereunto set his hand and seal hereon and acknowledges and files in the office of the Secretary of State of Florida, the foregoing Articles of Incorporation, this 16 day of September 2008.

I accept my position as registered agent



RAUL F. PINO/Registered Agent
Incorporator

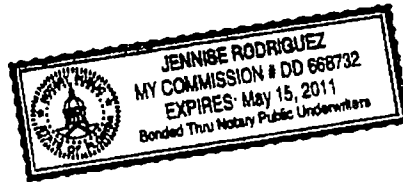
STATE OF FLORIDA)
)SS
COUNT OF DADE)

BEFORE ME, personally appeared Raul F. Pino to me well known, and known to me to be the person described in, and who took an oath and executed the foregoing instrument and acknowledged to and before me that he executed the said instrument for the purposes therein expressed.

WITNESS my hand and official seal, this 14 day of September, 2008.

NOTARY PUBLIC
State of Florida at Large

My Commission Expires:



FILED
2008 SEP 17 AM 10:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Form **8868**
(Rev. April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T) However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868 For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits

Type or print	Name of Exempt Organization ALIANZA NACIONAL CONSTITUCIONALISTA	Employer identification number 26-3399558
File by the due date for filing your return See instructions	Number, street, and room or suite no If a P O box, see instructions 2440 CORAL WAY	
	City, town or post office, state, and ZIP code For a foreign address, see instructions MIAMI FL 33145	

Check type of return to be filed (file a separate application for each return)

- | | | |
|--|--|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

• The books are in the care of ▶ **Horacio Garcia Sr.**

Telephone No ▶ _____ FAX No ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **08/15/10**, to file the exempt organization return for the organization named above The extension is for the organization's return for
▶ calendar year **2009** or
▶ tax year beginning _____, and ending _____

2 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	3a	\$
3b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit	3b	\$
3c Balance Due Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	3c	\$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev 4-2009)