



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 2400

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The Museum provides full immersion educational programs for youth on multiple topics including the perils of communism and, cultural Marxism. The Museum explores the case of Cuba and how what was once the most prosperous democracy in the Americas became an impoverished dictatorship. It also highlights how Cuban Americans triumphed through self-determination, their integration into the greatest system/country that mankind has conceived. It also includes art and cultural exhibits by and on Cuban exiles, and the struggle against socialism in other countries.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2025-2026

Type of Funding	Amount
Operating	0
Fixed Capital Outlay	500,000
<b>Total State Funds Requested</b>	<b>500,000</b>

7. Total Project Cost for Fiscal Year 2025-2026 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	500,000	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2025-2026</b>	<b>500,000</b>	<b>100%</b>

8. Has this project previously received state funding?

If yes, provide the most recent instance:

Fiscal Year (YYYY-YY)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future-year funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

**Complete questions 10 and 11 for Fixed Capital Outlay Projects**



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**10. Status of Construction**

**a. What is the current phase of the project?**

- Planning    
  Design    
  Construction    
  N/A

**b. Is the project "shovel ready" (i.e permitted)?** No

**c. What is the estimated start date of construction?** 10/01/2025

**d. What is the estimated completion date of construction?** 03/01/2026

**e. What funding stream will be used for ongoing operations and maintenance of the project?**

Multiple sponsorships from FIU (\$500k); Miami Dade County Commission (recurring \$550,000 by vote of the County Commissioners); multiple private donations.

**11. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.**

N/A It's a 501c3

**12. Details on how the requested state funds will be expended**

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Expansion of building facade and new cover for rooftop terrace to be able to hold live cultural events including concerts, live plays and conferences.	500,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>500,000</b>

**13. Program Performance**

**a. What specific purpose or goal will be achieved by the funds requested?**

Ability to hold live cultural events including concerts, live plays and conferences, for greater audiences, than the current 125 seat theater which is full to capacity at almost every event.

**b. What activities and services will be provided to meet the intended purpose of these funds?**

Concerts, live plays and conferences.

**c. What direct services will be provided to citizens by the appropriation project?**



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**d. Who is the target population served by this project? How many individuals are expected to be served?**

South FL tri-county region and statewide visitors. In addition, United States of America and international visitors with an interest in Latin American history. Finally, the museum's target universes are students and adults of Cuban, Latin American, and other nationalities with an interest in civics and government types.

**e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?**

The thousands of people who will be able to participate in the live concerts, theatrical plays, and conferences by renown speakers; the outcome can be measured by the number of people attending these events.

**f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for in the contract?**

The agency may withhold funding if the funds appropriated are not used for their intended purpose.

**14. Is this project related to mitigation, response, or recovery from a natural disaster?**  No

**a. If Yes, what phase best describes the project?**

- Mitigation (reducing or eliminating potential loss of life or property)
- Response (addressing the immediate and short-term effects of a natural disaster)
- Recovery (assisting communities return to normal operations, including rebuilding damaged infrastructure)

**b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):**

**15. Has the entity applied for or received federal assistance for this project?**

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply

**a. If yes, provide the FEMA project worksheet ID#:**

**b. Provide the total project cost listed on the FEMA project worksheet:**

**16. Has the entity applied for or received state assistance for this project (other than this request)?**

- Yes, Applied
- Yes, Received



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- No
- No, but intends to apply

**a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):**

**17. Requester Contact Information**

**a. First Name**  **Last Name**

**b. Organization**

**c. E-mail Address**

**d. Phone Number**  **Ext.**

**18. Recipient Contact Information**

**a. Organization**

**b. Municipality and County**

**c. Organization Type**

- For Profit Entity
- Non Profit 501(c)(3)
- Non Profit 501(c)(4)
- Local Entity
- University or College
- Other (please specify)

**d. First Name**  **Last Name**

**e. E-mail Address**

**f. Phone Number**  **Ext.**

**19. Lobbyist Contact Information**

**a. Name**

**b. Firm Name**

**c. E-mail Address**

**d. Phone Number**



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*The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.*