

The Florida Senate Local Funding Initiative Request Fiscal Year 2024-2025

LFIR # 3570

1.	Project Title	Cuban Club Struc	ctural Assessment	and Bathrooms Repa	iir		
2.	Senate Sponsor	Darryl Rouson					
3.	Date of Request	01/16/2024					
4.	Project/Program De	escription					
	The Cuban Club Building requires an assessment of the soundness of the structural columns. Evidence of cracking on outer layer of bricks have been visually determined, leading to the conclusion that exploration of the columns are a necessity due to potential spalling, jeopardizing the integrity of the building and leading to internal load bearing structure element failure. In the Cuban Club's 107 years, this has not been done, and it is necessary to ensure its longevity. Additionally, the restrooms on the first and third floors are in need of upgrading and repair. The last remodeling of the restrooms occurred in 1991, which updated the aesthetic elements. The plumbing to those areas are an undetermined number of years older. To remedy this, tiling of the floors and walls need to be done, counter tops changed, plumbing needs to be updated, a new backflow connection established, and water and light fixtures upgraded to water and energy-efficient models.						
5.	State Agency to rec	ceive requested fur	nds Departm	ent of Commerce			
	State Agency conta	cted? No					
6	Amount of the Nonr	ecurring Request t	for Fiscal Year 20	24-2025			
J. 7			101 1 10001 1001 20				
	Type of Funding			Amo			
	Operations Fixed Capital Outlay			920,000			
	Fixed Capital Outlay Total State Funds F			830,000 830,000			
	Total Project Cost for Fiscal Year 2024-2025 (includin			ng matching funds available for this project)			
7. ⁻	Total Project Cost fo	or Fiscal Year 2024	l-2025 (including	matching funds avai	ilable for this proj	ect)	
7. ⁻	Total Project Cost fo	or Fiscal Year 2024	l-2025 (including	matching funds avai	ilable for this proj	ect)	
7. -	•			_		ect)	
	Type of Funding			Amount	Percentage 100%	ect)	
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	Type of Funding Total State Funds Re	equested (from ques	stion #6)	Amount 830,000	Percentage 100% 0% 0%		
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8.	Type of Funding Total State Funds Re Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pre Fiscal Year (yyyy-yy) Is future funding lik a. If yes, indicate no	amount of this requested (from quested (from quested amount of this requested for Fiscal Year 202) Eviously received some Recurring amount of this requested for Fiscal Year 202 Eviously received some Recurring amount of this requested for Fiscal Year 202 Amount of this requested for Fiscal Year 202 Eviously received some Recurring amount of this requested for Fiscal Year 202 Eviously received some Recurring amount of this requested for Fiscal Year 202 Eviously received some Recurring amount of this requested for Fiscal Year 202 Eviously received some Recurring amount of this requested for Fiscal Year 202 Eviously received some Recurring amount of this requested for Fiscal Year 202 Eviously received some Recurring amount of this requested for Fiscal Year 202 Eviously received some Recurring amount of this requested for Fiscal Year 202 Eviously received some Recurring amount of this requested for Fiscal Year 202 Eviously received some Recurring amount of this requested for Fiscal Year 202 Eviously received some Recurring amount of this requested for Fiscal Year 202 Eviously received and Fiscal Year 202 Eviously received some Recurring amount of this requested for Fiscal Year 202 Eviously received for Fiscal Year 202 Eviously receiv	estion #6) 24-2025 state funding? unt Nonrecurring d? nt per year.	Amount 830,000 0 0 0 830,000 No Specific Appropriation #	Percentage 100% 0% 0% 0% 0% 100%		
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The Florida Senate Local Funding Initiative Request Fiscal Year 2024-2025

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

LFIR #3570

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830,000

830,000

	No				
	If yes, indicate the amount of fu	nds received and what the t	unds were used for.		
C	omplete questions 11 ar	nd 12 for Fixed Cap	ital Outlay Proj	ects	
11	. Status of Construction				
	a. What is the current phase of the	ne project?			
	Planning	○ Construction ○ N/A	4		
	b. Is the project "shovel ready" (i.e permitted)?	No		
	c. What is the estimated start date	te of construction?	September 2024		
	d. What is the estimated complete	ion date of construction?	December 2025		
12	2. List the owners of the facility to relationship between the owner			outlay funding. Inc	lude the
Cuban Club Foundation Inc.					
13	. Details on how the requested st	ate funds will be expended			
	Spending Category		Description		Amount
	Administrative Costs:				I
	Executive Director/Project Head Salary and Benefits				(
	Other Salary and Benefits				(
	Expense/Equipment/Travel/Supplies/Other				(

14. Program Performance

Planning Engineering

Consultants/Contracted Services/Study

Consultants/Contracted

Salary and Benefits

Services/Study

Operational Costs: Other

Construction/Renovation/Land/

Expense/Equipment/Travel/Supplies/

Fixed Capital Construction/Major Renovation:

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

Total State Funds Requested (must equal total from question #6)

Structural assessment, tiling, plumbing, electrics and upgrading of

restrooms on first and third floors, new backflow connection



1

The Florida Senate Local Funding Initiative Request Fiscal Year 2024-2025

LFIR #3570

The Cuban Club Building requires an assessment of the soundness of the structural columns. Evidence of cracking on outer layer of bricks have been visually determined, leading to the conclusion that exploration of the columns are a necessity due to potential spalling. Additionally, the restrooms on the first and third floors are in need of upgrading and repair. To remedy this, tiling of the floors and walls need to be done, counter tops changed, plumbing needs to be updated, a new backflow connection established, and water and light fixtures upgraded to water and energy-efficient models. The building serves as an events center and is important to Tampa's tourism and is also open for historic tours and helps educate visitors about Ybor City's immigrant past, the cigar industry and the mutual aid societies.

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

The Foundation will hire an architect, engineer and contractor to make the improvements and repairs that are within the scope of the project. All work will be permitted, approved by the Barrio Latino Commission and when complete, inspected.

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

The repair of the Cuban Club will ensure its activity as a venue for a variety of events such as concerts, performances, art and commercial exhibits, political rallies and gatherings, non-profit fund raisers, weddings and other events along with attracting a wide spectrum of tourist visitors. The soundness of the building allows continued use for historic and ghost tours which supports Ybor City's tourist economy. The repairs to the building will also create immediate construction jobs. The County request our building as a hurricane shelter and distribution center.

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

While the construction project doesn't serve individuals or a target population the building is visited and used by close to 50,000 people a year.

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

The repairs will encourage and promote more use of the building as a convention/events center, a tourist attraction, a concert facility and as a storm shelter and distribution center during hurricanes. Our success will be measured by an increase in events and attendance. Increased use will also cause an increase in remitted sales and a jump in parking fees at neighboring City of Tampa Parking Garages and street parking.

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 the contract?

The Contracting Agency should not distribute any funds until the Cuban Club Foundation has proven that it has met or exceeded all deliverables. Non-performance would exclude the project from state funding.

5.	. Requester Contact Information					
	a. First Name	Roland P		Last Name	Manteiga	
	b. Organization	Cuban C	lub Foundation, I	nc		
	c. E-mail Address	pmanteig	a1@gmail.com			_
	d. Phone Number	(813)248	-3921	Ext.		_
6. Recipient Contact Information						
	a. Organization	Cuban C	lub Foundation, I	nc		
	b. Municipality and	d County	Hillsborough			
c. Organization Type						
	□For Profit Entity					
	☑Non Profit 501(c	:)(3)				



The Florida Senate Local Funding Initiative Request Fiscal Year 2024-2025

LFIR # 3570

□Non Profit 501(c	□Non Profit 501(c)(4)					
□Local Entity	□Local Entity					
□University or Co	□University or College					
□Other (please sp	□Other (please specify)					
d. First Name	Roland P.	Last Name	Manteiga			
e. E-mail Address	pmanteiga1@gmail.com					
f. Phone Number	(813)248-3921					
17. Lobbyist Contact Information						
a. Name	None					
b. Firm Name						
c. E-mail Address						
d Phone Number						