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MIAMI-DADE  
ELECTIONS

**ELECTIONEERING COMMUNICATION  
STATEMENT OF ORGANIZATION**

(PLEASE TYPE)

OFFICE USE ONLY

**1. Full Name of Organization**

CITIZENS FOR PROGRESS & INTEGRITY

Telephone

305-929-8500

Mailing Address (include city, state and zip code)

18851 NE 29 AVENUE, SUITE 303 AVENTURA, FL 33180

Street Address (include city, state and zip code)

18851 NE 29 AVENUE, SUITE 303 AVENTURA, FL 33180

**2. Affiliated or Connected Organizations**

Name of Affiliated or Connected Organization	Mailing Address	Relationship
N/A	N/A	N/A

**3. Area, Scope and Jurisdiction of the Organization**

MIAMI-DADE COUNTY

**4. Identify by Name, Address & Position, the Custodian of Books & Accounts for the Organization**

Full Name	Mailing Address	Street Address	Title or Position
JOSE A. RIESCO, CPA	95 MERRICK WAY #250 CORAL GABLES, FL 33134	95 MERRICK WAY #250 CORAL GABLES, FL 33134	TREASURER

**5. This Organization was formed (check applicable box): (Calendar quarters end the last day of March, June, September, and December.)**

- As a newly created organization during the current calendar quarter.
- From an organization existing prior to the current calendar quarter.

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**REGISTERED AGENT  
STATEMENT OF APPOINTMENT**  
(Section 106.022, F.S.)

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- Original Appointment       Change of Appointment  
 Change of Mailing Address       Change of Physical Address

**Registered Agent and Office Information**

Name: JUAN CARLOS PLANAS      Telephone: 305-929-8500

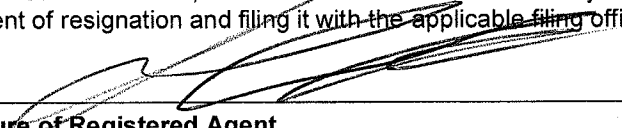
Street Address: 18851 NE 29 AVENUE, SUITE 303

City: AVENTURA      State: FL      Zip Code: 33180

Mailing Address: 18851 NE 29 AVENUE, SUITE 303

City: AVENTURA      State: FL      Zip Code: 33180

I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written statement of resignation and filing it with the applicable filing officer.

Signature of Registered Agent:       Date: 10/13/11

**Former Registered Agent and Office Information (for changes only)**

Name:      Telephone:

Street Address:

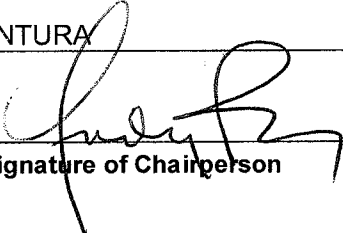
City:      State:      Zip Code:

**Committee or Organization Information**

Name of Committee or Organization: CITIZENS FOR PROGRESS & INTEGRITY

Street Address: 18851 NE 29 AVENUE SUITE 303      Telephone: 305-929-8500

City: AVENTURA      State: FL      Zip Code: 33180

Signature of Chairperson: 

Printed Name of Chairperson:      Date: 10/7/11

**6. List By Name, Mailing and Street Address, & Position, Other Principal Officers, including the treasurer and deputy treasurer, if any. Include the top-ranking officer's (e.g., chairperson) name and information.**

Full Name	Mailing Address	Street Address	Title or Position
ANDY PEREZ	3100 S DIXIE HIGHWAY SUITE 100 MIAMI, FL 33133	3100 S DIXIE HIGHWAY SUITE 100 MIAMI, FL 33133	CHAIRMAN
JOSE A. RIESCO, CPA	95 MERRICK WAY #250 CORAL GABLES, FL 33134	95 MERRICK WAY #250 CORAL GABLES, FL 33134	TREASURER

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**7. In the Event of Dissolution, What Disposition will be Made of the Residual Funds?**

RETURNED TO CONTRIBUTORS PRO-RATA OR DONATED TO A 501 (C)(3).

**8. List All Banks, Safety Deposit Boxes, or Other Depositories Used by this Organization for Electioneering Communications**

Name of Bank or Depository	Mailing Address
GREAT FLORIDA BANK	150 ALHAMBRA CIRCLE, FIRST FLOOR CORAL GABLES, FL 33134

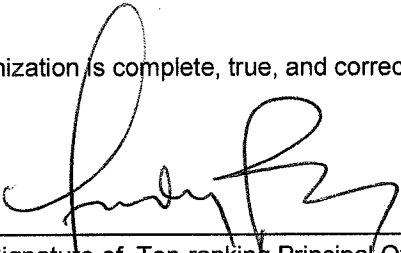
**9. List All Reports Required to be Filed by this Organization with Federal Officials, & the Names, Addresses, & Positions of Such Officials, If Any**

Report Title	Dates Required to be Filed	Name & Position of Official	Mailing Address
SS-4	UPON FORMATION	IRS	OGDEN, UT 84201
FORM 8871, AS REQUIRED	UPON FORMATION	IRS	OGDEN, UT 84201
FORM 1120-POL, AS REQUIRED	MARCH 15, ANNUALLY	IRS	OGDEN, UT 84201
FORM 990, AS REQUIRED	MAY 15, ANNUALLY	IRS	OGDEN, UT 84201

STATE OF FLORIDA MIAMI-DADE COUNTY

I, ANDY PEREZ, certify that the information in this Statement of

Organization is complete, true, and correct.

**X**   
 Signature of Top-ranking Principal Officer of Organization

10/17/11  
 Date

**Receipt of Handbook and the  
Election Laws of the State of Florida**



**Candidate/Chairperson:**

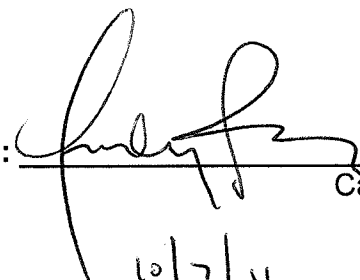
ANDY		PEREZ
First Name	Middle Name	Last Name

CITIZENS FOR PROGRESS & INTEGRITY  
Office Sought / Organization

**This is to acknowledge my receipt of the following documents:**

Handbooks Available	Edition	Downloaded from Internet	CD-Rom	Other
The Election Laws of the State of Florida		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Miami-Dade County Qualifying Handbook		<input type="checkbox"/>	<input type="checkbox"/>	
Committee Handbook		<input type="checkbox"/>	<input type="checkbox"/>	
Electioneering Committee Handbook		<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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**Received by:**   
 Candidate/Chairperson Signature

**Date:** 10/17/11

**Phone No.:** 305-929-8500

**Fax No.:** \_\_\_\_\_

**E-mail address:** jcp@kfb-law.com

**Campaign Treasurer's Report  
Electronic Filing Requirements  
for Miami-Dade County**



Candidate (office sought): \_\_\_\_\_

Political Committee: \_\_\_\_\_ CITIZENS FOR PROGRESS & INTEGRITY

Party Executive Committee: \_\_\_\_\_

Other: \_\_\_\_\_

I, \_\_\_\_\_ ANDY PEREZ  
(Please print name of Candidate or Chairperson)

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understand that Campaign Treasurer's Reports must be filed electronically in order to comply with Miami-Dade County requirements.

Additionally, a hard copy of the Campaign Treasurer's Reports must be printed from the Miami-Dade County Elections Department website and submitted by the reporting deadline with original signatures.

\_\_\_\_\_  
Signature of Candidate or Chairperson

\_\_\_\_\_  
Date

Day Time Telephone No: 305-929-8500

Email Address: jcp@kfb-law.com

*This form must be filed with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository form is filed.*



**KURKIN • FOREHAND • BRANDES**

ATTORNEYS AT LAW

HARBOR CENTRE

18851 N.E. 29<sup>TH</sup> AVENUE

SUITE 303

AVENTURA, FLORIDA 33180

Miami-Dade Elections

Attn: Maria Acosta

2700 NW 87th Avenue

Doral, Florida 33172