

**STATE OF FLORIDA  
 APPOINTMENT OF CAMPAIGN TREASURER  
 AND DESIGNATION OF CAMPAIGN  
 DEPOSITORY FOR POLITICAL COMMITTEES  
 AND ELECTIONEERING COMMUNICATION  
 ORGANIZATIONS**

(Sections 106.011(1) & 106.021(1), F.S.)

(PLEASE TYPE)

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MIAMI-DADE  
 ELECTIONS

**CHECK APPROPRIATE BOX:**

Original Appointment     Deputy Treasurer     Reappointment of Treasurer     Secondary Depository

1. Committee or Electioneering Communication Organization Name People Improving Our Neighborhoods	2. Mailing Address 247 SW 8th Street, #315
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Telephone (optional)	3. City Miami	4. County Miami-Dade	5. State FL	6. Zip Code 33130
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The following person has been appointed to serve as  Campaign Treasurer     Deputy Treasurer    for the above named committee.

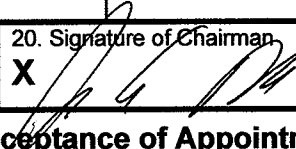
7. Name of Treasurer or Deputy Treasurer Jorge Navarro <i>JNN</i>	8. Street Address 247 SW 8th Street, #315
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9. City Miami	10. County Miami-Dade	11. State FL	12. Zip Code 33130
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I have designated the following named bank as my  Primary Depository     Secondary Depository

13. Bank Name (include account number) Premiere Bank	14. Street Address 5900 Bird Road
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15. City Miami	16. County Miami-Dade	17. State FL	18. Zip Code 33155
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19. Name of Chairman Jorge Bilbao	20. Signature of Chairman <i>X</i> 
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**Campaign Treasurer's Acceptance of Appointment**

I, Jorge Navarro, do hereby accept the appointment as  
 (Please Print or Type) *JNN*

Campaign Treasurer     Deputy Treasurer    for the People Improving Our Neighborhoods

Committee or Organization. As a duly registered voter in Miami-Dade County, Florida, I am

qualified to accept this appointment.

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S  
 ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.**

3/15/06  
Date

*X*   
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF ORGANIZATION  
OF POLITICAL COMMITTEE**

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ELECTIONS

**1. Full Name of Committee**

People Improving Our Neighborhoods

Date

3/15/06

Mailing Address (if post office box or drawer, please add street address)

247 SW 8th Street, #315

Telephone

(305 ) 305-6299

City

Miami

County

Miami-Dade

State

FL

Zip Code

33130

**2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)**

Name of Affiliated or  
Connected Organization

Mailing Address

Relationship

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

Issues affecting development and growth management

**4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)**

Civic

**5. Identify by Name, Address and Position, the Custodian of Books and Accounts (include treasurer's name)**

Full Name

Mailing Address

Committee Title or Position

Jorge Bilbao

247 SW 8th Street, #315  
Miami, FL 33130

Chair/Treasurer

**6. List by Name, Address and Position, Other Principal Officers, Including Officers and Members of the Finance Committee, If Any (include chairman's name)**

Full Name	Mailing Address	Committee Title or Position
Jorge Bilbao	247 SW 8th Street, #315 Miami, FL 33130	Chairman

**7. List by Name, Address, Office Sought and Party Affiliation Each Candidate or Other Individual that this Committee is Supporting**

Full Name	Mailing Address	Office Sought	Party

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**8. List Any Issues this Committee is Supporting:**  
 List Any Issues this Committee is Opposing: The recall of County Commissioner Natacha Seijas

**9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party**

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

**11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds**

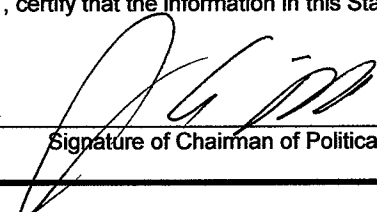
Name of Bank or Depository & Account Number	Mailing Address
Premiere Bank	5900 Bird Road Miami, FL 331 55

**12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Addresses and Positions of Such Officials, If Any**

Report Title	Dates Required to be Filed	Name & Position of Official	Mailing Address

STATE OF Florida COUNTY Miami-Dade

I, Jorge Bilbao, certify that the information in this Statement of Organization is complete, true and correct.

**X**   
 Signature of Chairman of Political Committee

**STATEMENT OF ORGANIZATION  
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

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**MIAMI-DADE  
ELECTIONS**

<b>1. Full Name of Committee</b> People Improving Our Neighborhoods			Date 3/15/06
Mailing Address (if post office box or drawer, please add street address) 247 SW 8th Street, #315			Telephone (305 ) 305-6299
City Miami	County Miami-Dade	State FL	Zip Code 33130

**2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)**

Name of Affiliated or Connected Organization	Mailing Address	Relationship

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

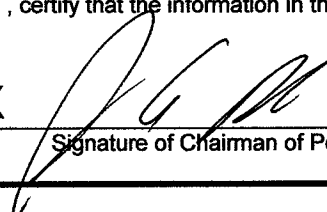
Issues affecting development and growth management

**4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)**

Civic

**5. Identify by Name, Address and Position, the Custodian of Books and Accounts (include treasurer's name)**

Full Name	Mailing Address	Committee Title or Position
Jorge Bilbao	247 SW 8th Street, #315 Miami, FL 33130	Chair/Treasurer

<b>6. List by Name, Address and Position, Other Principal Officers, Including Officers and Members of the Finance Committee, If Any (include chairman's name)</b>			
<b>Full Name</b>	<b>Mailing Address</b>	<b>Committee Title or Position</b>	
Jorge Bilbao	247 SW 8th Street, #315 Miami, FL 33130	Chairman	
<b>7. List by Name, Address, Office Sought and Party Affiliation Each Candidate or Other Individual that this Committee is Supporting</b>			
<b>Full Name</b>	<b>Mailing Address</b>	<b>Office Sought</b>	<b>Party</b>
<b>8. List Any Issues this Committee is Supporting:</b>			
List Any Issues this Committee is Opposing: The recall of County Commissioner Natacha Seijas			
<b>9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party</b>			
<b>10. In the Event of Dissolution, What Disposition will be Made of Residual Funds?</b>			
<b>11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds</b>			
<b>Name of Bank or Depository &amp; Account Number</b>	<b>Mailing Address</b>		
Premiere Bank	5900 Bird Road Miami, FL 331 55		
<b>12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Addresses and Positions of Such Officials, If Any</b>			
<b>Report Title</b>	<b>Dates Required to be Filed</b>	<b>Name &amp; Position of Official</b>	<b>Mailing Address</b>
STATE OF <u>Florida</u>		<u>Miami-Dade</u> COUNTY	
I, <u>Jorge Bilbao</u> , certify that the information in this Statement of Organization is complete, true and correct.			
		<b>X</b>  _____ Signature of Chairman of Political Committee	

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