STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

OFFICE USE ONLY
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(PLEASE TYPE)

2015 FEB 13 PM 12: 27

MIAMI-DADE

FI FCTIONS 1. Full Name of Committee Telephone Concerned Citizens of South Western Miami-Dade County 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 (includes other committees of continuous existence and political committees) Name of Affiliated or Mailing Address Relationship Connected Organization N/A N/A N/A 3. Area, Scope and Jurisdiction of the Committee Miami-Dade County and the City of Sweetwater, Florida 4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.) Preserving Quality of Life in South Western Miami-Dade County 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 Carlos Trueba 1985 NW 88th Court Suite 101 Treasurer Doral, FL 33172

	-						THE RESIDENCE		-
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				
Juan-Carlos Planas, Esq.		18851 NE 29 Avenue, Suite 303 Aventura, Fl 33181		e 303	Chairman and Registered Agent				
7. List by Name, Address, Office Sought and Party Affiliation Each Candidate or Other Individual that this Committee is Supporting (if none, please indicate)									
Full Name	Full Name Mailing Address			Office Sought			Party		
Jose M. Diaz Manuel Duasso Prisca Barretto Idania Llanio	Manuel Duasso 10851 sw 2 st., K303 risca Barretto 10311 sw 5 st., Sweetwater			Mayor - Sweet nate City Council, Group 7 - Sweet nate City Council, Group 6 City Council, Group 5			n/a -n/a n/a n/a	20	7
8 List Any legues this Committee is Supporting								I	
List Any Issues this Committee is Opposing: to be determined						100		<u>ක</u>	O
and the supporting the support of th						K			
		n, What Disposition will be			unds?			7	
Donation to 501(c)(3) charitable organization.									
11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds									
Name of Bank or Depository & Account Number Mailing Address									
City National Bank of Florida			8725 NW 18 Terrace Miami, FL 33172						
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	N	ame & Position o	f Official	Mailing Address			
SS4 Form 8871 Form 1120 POL Form 990		Upon Formation Upon Formation March 15, Annually May 15, Annually		ternal Revenue ervice	Э	Ogden, UT 84201			
STATE OF Florida			Miami-Dade COUNTY						
Juan-Carlos Planas , certify that the information in this Statement of									
Organization is complete, true and correct.									
X / 13/15									
Signature of Chairman of Political Committee Date									

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR**

POLITICAL COMMITTEES

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

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MIAMI-BADE ELECTIONS

CHECK APPROPRIATE BOX:			OFFICE USE ONLY		
Original Appointment of Treasurer Reappoin	tment of Treasurer		Deputy Treasurer		
1. Committee or Organization		2. Telephone			
Concerned Citizens of South Western Miami-Dao	(305) 929-8500				
Name of Treasurer or Deputy Treasurer 4. Email (optional))	5. Telephone (optional)			
Carlos Trueba Cp3z05@RTL-	cpa.com	(301) 59	3-0390		
6. Mailing Address 1985 NW 88th Court Suite 101 Do	ral, FL 331	172			
7. Street Address 1985 NW 88th Court Suite 101 I	Doral, FL	33172			
8. The following bank has been designated as the Prin	nary Depository	Seconda	ry Depository		
9. Name of Bank	10. Street Address				
City National Bank of Florida	8725 NW 18 Terrace				
11. City	12. State		13. Zip Code		
Miami	Flori	da	33172		
14. Signature of Chairman	15. Name of Chair	man (Print or Type los Planas	*		
Campaign Treasurer's Ac	ceptance of A	ppointment			
Carlos Trueba		, do hereb	y accept the appointment as		
(Please Print or Type) treasurer or deputy treasurer for Concerned Citizens of South Western Miami-Dade County					
(Committee or Organization)					
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.					
2/13/15 X	(Ri	The state of the s			
/ / Date	Signature of Campa	aign Treasurer or I	Deputy Treasurer		

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

REPORTED

2015 FFR 12 DM

V			LB 13 PM 12: 27		
		MIAMI-DADE			
Original Appointment Change of Appoin	tment	No.	MAMI-DADE ELECTIONS		
Change of Mailing Address Change of Physic	al Address				
Registered Ag	ent and Office I	nformatio	n		
Name Juan-Carlos Planas, Esq.			Telephone 305-929-8500		
Street Address 18851 NE 29 Avenue, Suite 303					
City Aventura	State Florida		Zip Code 33181		
Mailing Address 18851 NE 29 Avenue, Suite 303	Acceptance of the second se				
City Aventura	State Florida		Zip Code 33181		
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 /			
Former Registered Agent a	and Office Inform	mation (fo	r changes only)		
Name			Telephone		
Street Address	The second secon				
City	State		Zip Code		
Committee or	Organization I	nformatio	7		
Name of Committee or Organization		II O I I I I I I I I I I	A. T		
[O = - =] O : L : O L - \					
Concerned Citizens of South Wester			у		
Street Address 18851 NE 29 Avenue, Suite 303					
Street Address			y Telephone		
Street Address 18851 NE 29 Avenue, Suite 303 City	ern Miami-Dac		y Telephone 305-929-8500 Zip Code		
Street Address 18851 NE 29 Avenue, Suite 303 City	ern Miami-Dac		y Telephone 305-929-8500 Zip Code		
Street Address 18851 NE 29 Avenue, Suite 303 City Aventura Signature of Chairperson	ern Miami-Dac		y Telephone 305-929-8500 Zip Code		
Street Address 18851 NE 29 Avenue, Suite 303 City Aventura	ern Miami-Dac		y Telephone 305-929-8500 Zip Code		



Access to Handbook and the **Election Laws of the State of Florida**



2015 EED 12

				2013 FEB 1 3 PM 12: 27
Candidate/Chairper	son:		Planas	MIAMI-BADE ELECTIONS
First Na	me	Middle Name		Last Name
Concerned Citizens	of South Wester	n Miami-Dade County		
	Of	fice Sought / Organization)	
	cribed in the	responsibility to read following resources ebsite:		
Contains infor Florida, Count	rmation on State ty Laws and Har	ook (http://www.miamidade Laws and Handbooks, th ndbooks, Qualifying Inforn andidate Information, and	e Election nation, Ele	Laws of the State of ectronic Reporting Dates
Contains infor Florida, Count	rmation on State ty Laws and Har	k (<u>http://www.miamidade.g</u> e Laws and Handbooks, th Indbooks, Electronic Repo Ition, and Recent Legislativ	e Election ting Date:	Laws of the State of sand Procedures,
Acknowledged k	oy:	Candidate / Chairpersor	n Signatur	е
Date:	2/13/10			and the second second
Primary Telepho		805-929-8500		
Alternate Teleph	none Number:	850-980-6542		
E-mail address:	jcplanas@kb-a	attorneys.com		

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

□ Candidate (office sought):			
Candidate's Florida Voter Registration Number:		7-	
Political Committee: Concerned Citizens of South Western Mi	ami-Da	ide Cc	
□ Party Executive Committee:			
□ Other:		2	Megagas
Juan-Carlos Planas, Esq. (Please print name of Candidate or Chairperson)	MAN I	FEB 13	RECE
(Please print name of Candidate of Chairperson) understand that Campaign Treasurer's Reports <u>must</u> be filed electro		vie the	<
Supervisor of Elections website by midnight of the day designated in o	- Alleria	0.0	The same
with Miami-Dade County requirements. I also acknowledge that Sections			
21 of the Code of Miami-Dade County regarding the filing of the ca			
reports with the Supervisor of Elections were recently amended in that			
nardcopies are no longer required.	-1.9		
l also understand that, in accordance with Section 12-14.1 of the Code	of Miar	ni-Dade	Ŕ
County, Florida, candidates running for the Offices of Miami-Dade	County	Mayor,	
Commissioner, Property Appraiser, Clerk of the Circuit Courts, and Con	nmunity	Council	ĺ
must now file the Absentee Ballot Campaign Report (MD-ED 26) to disc	lose the	names	j
of paid campaign workers engaged in absentee ballot activities.			
	/	/	
9/4	13/0	5	
Signature of Candidate or Chairperson	Date		
305-929-8500 Day Time Telephone Number:			
850-980-6542 Alternate Contact Number:			
jcplanas@kb-attorneys.com		11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Email Address: Cpazos D RTC- cpa.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.