

**CANDIDATE OATH -  
JUDICIAL OFFICE**

Check box **only** if you are seeking to qualify as a write-in candidate:

Write-in candidate

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MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT OFFICE USE ONLY

**Candidate Oath**

(Section 105.031, Florida Statutes)

I, Miguel "Mike" Mirabal

*(Print name above as you wish it to appear on the ballot. If your last name consists of two or more names but has no hyphen, check box . (See page 2 - Compound Last Names). No change can be made after the end of qualifying. Although a write-in candidate's name is not printed on the ballot, the name must be printed above for oath purposes.)*

am a candidate for the judicial office of County Judge, 11,  
(Office) (District #) (Circuit #)

9; my legal residence is Miami-Dade County, Florida; I am a qualified elector  
(Group #)

of the state and of the territorial jurisdiction of the court to which I seek election; I am qualified under the Constitution and the Laws of Florida to hold the judicial office to which I desire to be elected or in which I desire to be retained; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.

**Section 876.05, Florida Statutes, oath** (only applicable if elected and when term of office begins): I, a citizen of the State of Florida and of the United States of America, and being employed by or an officer of the court system and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

Candidate's Florida Voter Registration Number (located on your voter information card): 109338519

**Phonetic spelling for audio ballot:** Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form): *[Not applicable to write-in candidates.]*

MIGUEL "MIKE" MIRABAL

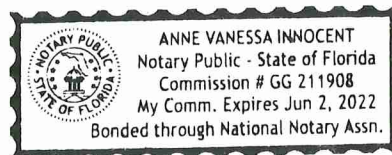
**X** [Signature] (305) 7731010 mmirabal@globallegalmiami.com  
Signature of Candidate Telephone Number Email Address

441 SANDUINO AVE CORAL GABLES, FL 33144  
Address City State ZIP Code

STATE OF FLORIDA  
COUNTY OF Miami-Dade

[Signature]  
Signature of Notary Public  
Print, Type, or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me by physical  or  
online  presence this 16<sup>th</sup> day of April, 2020.  
Personally Known:  or Produced Identification:   
Type of Identification Produced: Florida Driver License



Please print or type your name, mailing address, agency name, and position below:

**OF FINANCIAL INTERESTS**

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 MIAMI-DADE COUNTY  
 ELECTIONS DEPARTMENT

LAST NAME — FIRST NAME — MIDDLE NAME:  
 Mirabal Miguel F.

MAILING ADDRESS:  
 441 Sansovino Ave.

CITY: ZIP: COUNTY:  
 Coral Gables 33146 Miami-Dade

NAME OF AGENCY:  
 11th Judicial District of Florida

NAME OF OFFICE OR POSITION HELD OR SOUGHT:  
 Miami - Dade County Court Judge Group #9

CHECK IF THIS IS A FILING BY A CANDIDATE

**PART A -- NET WORTH**

Please enter the value of your net worth as of December 31, 2019 or a more current date. [Note: Net worth is not calculated by subtracting your reported liabilities from your reported assets, so please see the instructions on page 3.]

My net worth as of 12/31, 20 19 was \$ 1,684,633.50.

**PART B -- ASSETS**

**HOUSEHOLD GOODS AND PERSONAL EFFECTS:**

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use, whether owned or leased.

The aggregate value of my household goods and personal effects (described above) is \$ 78,500.00

**ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:**

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
2008 Jeep Wrangler	\$14,422.00
1995 Boston Whaler & Torino Trailer	\$19,500.00
2002 Malaguti Phantom F12 Motor Cycle	\$3,750.00
441 Sansovino Ave., Coral Gables, FL 33145 (Residence)	\$675,500.00

**PART C -- LIABILITIES**

**LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4):**

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Chase Credit Card, P.O. Box 6294 Carol Stream, IL 60197-6294	14,303.44
Home Depot Credit Card, PO Box 90001010, Louisville KY, 40290	5,893.64
Fed Loan Servicing PO Box 3661, Harrisburg, PA 69184	105,182.00

**JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:**

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
n/a	

**PART D -- INCOME**

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2019 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

I elect to file a copy of my 2019 federal income tax return and all W2's, schedules, and attachments.  
 [If you check this box and attach a copy of your 2019 tax return, you need not complete the remainder of Part D.]

**PRIMARY SOURCES OF INCOME (See instructions on page 5):**

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT
Global Legal	2655 Lejeune Rd., Suite 410 Coral Gables, FL 33146	\$95,750.00

**SECONDARY SOURCES OF INCOME** [Major customers, clients, etc., of businesses owned by reporting person--see instructions on page 5]:

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
n/a			

**PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 6]**

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	n/a	n/a	n/a
ADDRESS OF BUSINESS ENTITY	n/a	n/a	n/a
PRINCIPAL BUSINESS ACTIVITY	n/a	n/a	n/a
POSITION HELD WITH ENTITY	n/a	n/a	n/a
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	n/a	n/a	n/a
NATURE OF MY OWNERSHIP INTEREST	n/a	n/a	n/a

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**PART F - TRAINING**

For officers required to complete annual ethics training pursuant to section 112.3142, F.S.

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

**OATH**

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

*[Handwritten Signature]*

SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

Sworn to (or affirmed) and subscribed before me by means of  physical presence or  online notarization, this 15 day of

APRIL 15, 2020 by MIGUEL F. MIRABAL

*[Handwritten Signature]*

(Signature of Notary Public--State of Florida)

WILLIAM M. BUSTAMANTE

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known  OR

OR

Produced Under

Notary Public State of Florida  
 William M. Bustamante  
 My Commission GG 176773  
 Expires 01/27/2022

Type of Identification Produced

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, \_\_\_\_\_, prepared the CE Form 6 in accordance with Art. II, Sec. 8, Florida Constitution, Section 112.3144, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

Signature

Date

**Preparation of this form by a CPA or attorney does not relieve the filer of the responsibility to sign the form under oath.**

**IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE**

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Supplement to the "CE Form 6 "Full and Public Disclosure of Financial Interest  
2019", for Miguel "Mike" Mirabal, Miami Dade County Court Judicial Candidate,  
Group #9 for the 11<sup>th</sup> Judicial District of Florida,

**PART B CONTINUED (Assets) aggregate value exceeds \$1,000.00**

household goods and personal effects of which aggregate value exceeds \$1,000.00 \$78,500.00

**PART B CONTINUED (Assets) individual value exceeds \$1,000.00**

27316 Cayman Lane Ramrod Key, FI 33042 (Real Estate Owned) \$581,300.00

5201 Orduna Drive, #7, Coral Gables, FI 33142 1/2 Interest \$198,965.50  
\$397,931.00, (Real Estate Owned)

North Western Mutual Cash Value Life Insurance \$25,957.04  
100 S.E. 2<sup>nd</sup> Street, Suite 2610, Miami, FL 33131

North Western Annuity Roth IRA Policy \$2,898.50  
100 S.E. 2<sup>nd</sup> Street, Suite 2610, Miami, FL 33131

Global Legal Law Firm Value (100% owned) \$95,000.00  
2655 LeJeune Rd., Suite 410, Coral Gables, FI 33134

Advantage Beauty Institute, LLC, (50% owned) \$90,000.00  
8951 Bonita Beach Rd, SE, #555, Bonita Springs, FL 34135

IFB Bank Account \$3,347.02  
777 SD.W. 37<sup>th</sup> Ave., Suite 700, Miami, FL 33135 (Checking)

IFB Bank Account 6593 \$1,550.26  
777 SD.W. 37<sup>th</sup> Ave., Suite 700, Miami, FL 33135 (Checking)

IFB Bank Account 6670 \$15,587.26  
777 SD.W. 37<sup>th</sup> Ave., Suite 700, Miami, FL 33135 (Savings)

Ocean Bank Account 3419 \$2650.00  
780 N.W. 42<sup>nd</sup> Ave., Miami, FL 33126 (Checking)

Ocean Bank Account 3620 \$585.00  
780 N.W. 42<sup>nd</sup> Ave., Miami, FL 33126 (Savings)

Money Loaned by Miguel Mirabal, \$500.00  
To the Campaign to elect  
Miguel "Mike" Mirabal through 12.31.19



**OFFICIAL RECEIPT**  
MIAMI-DADE COUNTY-FLORIDA

No. 7723342

RECEIVED FROM Miguel "Mike" Mirabal DATE 4 / 16 / 2020  
MONTH DAY YEAR

ADDRESS 2600 South Douglas Road, Suite 900 CASH \$ \_\_\_\_\_  
Coral Gables STREET ADDRESS FL 33134 CHECKS \$ 6,072.88  
CITY STATE ZIP

AMOUNT OF: Six Thousand Seveny Two DOLLARS, AND Eighty Eight CENTS TOTAL \$ 6,072.88

FOR PAYMENT OF: Qualifying Fee - County Judge Group 9

THIS RECEIPT NOT VALID UNLESS DATED, COMPLETED AND SIGNED BY AUTHORIZED EMPLOYEE OF DEPARTMENT.  
DEPT.: Elections BY: J. Venessa [Signature]

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TRANS	SUBSIDIARY	INDEX CODE	SUBJECT	AMOUNT

107.01-1 6/04

Miguel Mirabal  
Campaign Account

DATE 4/15/2020

PAY TO THE ORDER OF Miami-Dade County \$ 6,072.88  
Six Thousand Seveny Two Dollars 88 DOLLARS

**REGIONS**

FOR Miguel "Mike" Mirabal Judicial  
Qualifying Fee to Miami Dade County  
Elections Board, Group # 9

[Signature] MP

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