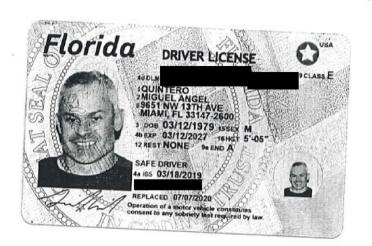
| MIAMI-DADE COUNTY | OFFICE | USE ONLY | |
|--|--|--|--|
| CANDIDATE OATH | Proof of residency provided: | S SEATON TENNISHMAN | |
| NONPARTISAN OFFICE | Proof of residency provided. | | |
| (Do not use this form if a Judicial or School Board Candidate) | Driver's License | Utility Bill | |
| Check box <i>only</i> if you are seeking to qualify as a write-in candidate: | ☐ Voter Information Card | ☐ Homestead Exemption Receipt | |
| Write-in candidate (Although a Write-in candidate's name is not printed on the ballot, | | | |
| (Although a Write-in candidate's name is not printed on the ballot, the name must be printed below for oath purposes.) | Property Tax Receipt | Lease Agreement | |
| Candi | date Oath | | |
| Name to appear on ballot: Miguel el Sk | shit to appear on the ballot - Name cannot | t be changed after qualifying.) | |
| Check box if two last names without hyphen Check box if name includes nickname (For use of a nickname, you must complete the Nickname Affidavis | t on reverse side.) | | |
| I swear or affirm that I am a candidate for the nonpartisan office of | Migmi - Onde | County Mayor | |
| I am a qualified elector of Miam | (Of | fice) lified under the Constitution and the | |
| (District/Area/Subarea #) | | | |
| Laws of Florida and the Home Rule Charter of Miami-Dade County to hold the office to which I desire to be nominated or elected; 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 from 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. | | | |
| I affirm that I am a resident of Miami-Dade County, meet the minmy residency in the district for the prescribed period. Under particle and that the facts stated in such are true. | | The state of the s | |
| Statement of Outstand I owe outstanding fines, fees, or penalties, that cumulatively exceed | ding Fines, Fees, or Penalties d \$250, for ethics or campaign fina | | |
| YES, I Do | NO, I Do Not | | |
| If you do, you must also specify the amount owed and each entity that levied the same on the reverse side. | | | |
| 11/1 | 233 | | |
| | 5 216.1497 | migrel quintero 100 @ go | |
| | ephone Number | Émail Address | |
| 9651 NW 13th Le Mign | | 33147 | |
| Address City | State | ZIP Code | |
| STATE OF FLORIDA | Nota | NNE VANESSA INNOCENT Properties of Florida | |
| COUNTY OF Miami-Dade | My C | ommission # HH 253 85 Comm. Expires Jun 2, 2026 | |
| Sworn to (or affirmed) and subscribed before me by physical 🔟 c | or Bonded the | rough National Notary Assn. | |
| online presence this 4th day of June | , 20 24. | 1 | |
| | A // | | |
| Personally Known:or | Anne Vonesse | Innound | |
| Personally Known:or Produced Identification: | Signature of Notary Public Print, Type, or Stamp Commissioned | I Name of Notary Public | |

| | Phonetic Spelling of Name |
|--|--|
| | quired for qualifying purposes): Print the name phonetically on the line below as you wish it to be ed by persons with disabilities (see instructions on page 3 of this form): |
| State | ement of Outstanding Fines, Fees or Penalties |
| at the time of subscribing to the oath or affirm exceed \$250 for any violations of s. 8, Art. II of | andidate, whether a party candidate, a candidate with no party affiliation, or a write-in candidate, shall, ation, state in writing whether he or she owes any outstanding fines, fees, or penalties that cumulatively the State Constitution, the Code of Ethics for Public Officers and Employees under part III of chapter 112, s of conduct and disclosure requirements, or chapter 106. |
| Amount | Entity |
| N/A | EM BE RECEIVED |
| | SAC PER SACRETARY |
| | 元 · · · · · · · · · · · · · · · · · · · |
| | |
| My legal name is | I am generally known by this nickname or have used it as part of my to mislead voters. My nickname does not imply I am some other person, constitute a political slogan or or that is obscene or profane. |
| this 4Th day of June | ANNE VANESSA NOCENT Notary Public - State of Florida Commission # nd 253185 My Comm. Expires Jun 2, 2026 Bonded through National Notary Assn. |



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General Information

Name:

Miguel Quintero

Address:

9651 NW 13TH AVE, MIAMI, FL 33147

County:

Organization

Suborganization

Title

N/A

CANDIDATE FOR

Position

Agency Name

Position sought or held

Miami-Dade County Mayor

Mayor, Miami-Dade County

Mayor

Net Worth

My Net Worth as of June 3, 2024 was \$ 213,263.10.

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Assets

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 effect is \$80,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

| Description of Asset | Value of Asset |
|--|----------------|
| 9651 NW 13th Ave Miami, FL 33147 | \$ 566,700.00 |
| Dogecoin | \$ 2,500.00 |
| Bank of America | \$ 9,000.00 |
| Loan Miguel Quintero (campaign) | \$ 1,500.00 |
| Investment Products/Retirement | \$ 58,000.00 |
| Loan/401k (hardship) my wife, Gaby Quintero (really me/us) | \$ 50,000.00 |
| Trailer | \$ 14,000.00 |

MIAMI-DADE COUNT

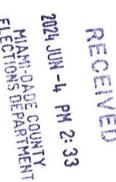
Liabilities

LIABILITIES IN EXCESS OF \$1,000:

| Name of Creditor | Address of Creditor | Amount of Liability |
|-----------------------|---|---------------------|
| Chase | 383 Madison Avenue, New York, New York, 10017 | \$ 8,500.00 |
| Bank of America | 100 North Tryon Street, Charlotte, NC 28255 | \$ 3,400.00 |
| Citi Bank | 388 Greenwich Street, 17th Floor, New York, New York, 10013 | \$ 5,600.00 |
| Apple (Goldman Sachs) | 200 Biscayne Blvd #3700, Miami, FL 33131 | \$ 2,650.00 |
| Lakeview (Mortgage) | P.O. Box 619063 Dallas, TX 75261-9063 | \$ 295,000.00 |
| ECSI Fed Perkins Loan | P.O. Box 836 Moon Township, PA 15108 | \$ 2,500.00 |

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

| Name of Creditor | Address of Creditor | Amount of Liability |
|------------------|---------------------|---------------------|
| N/A | | 4888 |



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 2023 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 2023 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

| Name of Source of Income Exceeding \$1,000 | Address of Source of Income | Amount |
|--|---------------------------------------|--------------|
| PayPal, Inc. | 2211 N. First St. San Jose, CA, 95131 | \$ 44,075.00 |
| See Attached | | 40 |

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

| Name of Business Entity | Name of Major Sources of Business' Income | Address of Source | Principal Business Activity of Source |
|----------------------------|--|---|--|
| Miami Artisan Village, LLC | Ocean Reef Club | 201 Ocean Reef Dr, Key Largo, FL 33037 | Entertainment and Education |

Business Entity #1 N/A Business Entity #1 N/A Business Entity #1 RECEIVED RECEIVED

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.

Miguel Quintero

Digitally signed: 06/03/2024

DAY TO FIA SEC

Printed from the Florida EFDMS System

CORRECTED (if checked)

| FILER'S name, street address, city or town, state or province, country, | ш. Е | FILER'S TIN | Ö | OMB No. 1545-2205 | |
|---|---|--|----------------|-------------------------------------|---|
| PayPal, Inc. 2211 N. First St. | 2 8 | PAYEE'S TIIN | N | 2023 | Payment Card and Third Party Network |
| San Jose, CA, 95131 Ph No: 888-221-1161 | la Gross amour card/third patransactions 44,075 | Gross amount of payment card/third party network transactions 44,075 | | Form 1099-K | Transactions |
| Check to indicate if FILER is a (an): Check to indicate transactions Payment settlement entity (PSE) reported are: Payment card | 1b Card Not Pritansactions \$ 44,075 | Card Not Present ransactions 44,075 | 2 | Merchant category code | Copy B For Payee |
| Electronic Payment Facilitator (EPF)/Other third party | E | Number of payment transactions | 4 & | Federal income tax withheld 0 | This is important tax |
| PAYEE'S name | -5a January \$ 2,415 | | £ & | February 1,690 | information and is being furnished to the IRS. If you are |
| Miguel Quintero | 5c March \$ 2,145 | 41 | PS ◆◆ | April 2,790 | required to file a return, a negligence penalty or other |
| Street address (including apt. no.) | 5e May \$ 2,935 | | Sf. | June 3,615 | sanction may be imposed on you if taxable income |
| 9651 NW 15th Ave City or town, state or province, country, and ZIP or foreign postal code | 5g July \$ 3,995 | 9 | Sh Sh | August 7,355 | results from this transaction and the IRS determines that it |
| Miami, FL US 33147 | September \$ 4,755 | | S | October 4,190 | has not been reported. |
| PSES name and telephone number | Sk November \$ 5,015 | 726 | S S | December 3,175 | |
| Ph No: 888-221-1161 | 6 State FT, | | _ | State identification no. | S State income tax withheld \$ |
| Account number (see instructions) | 3 | | | | 8 |

Department of the Treasury - Internal Revenue Service

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENSISSION SONIOMISSION (Resp. 1974)

Form 1099K

2024 JUN -4 PM 2: 34

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| MIGUEL "EL SKIPPER" QUINTERO CAMPAIGN 9651 NW 13 AVE MIAMI, FL 33147 | 5001 |
|--|--------------------|
| DATE 6/4/20 | OJY GEHEGK MANDE |
| PAY TO THE ORDER OF Miumi - Dale County \$ Two Thousand Three Hundred his | 2,300 0 |
| Two Thousand Three Hundred his | DOLLARS 1 Becurity |
| OCEAN BANK 780 NW 42ND AVE. 1 MIAMI, FLORIDA 33126 | |
| FOR Qualitying Fee Minni-Bale Tom Da | MP N |
| | |
| | |
| OFFICIAL RECEIPT No.005 | |
| MIAMI-DADE COUNTY-FLORIDA | 11/4 |
| RECEIVED FROM Miguel "el SKippen "Quintero DATE 6 1 | 4 12024 |
| ADDRESS 9651 NW 13 AVENUE CASH \$ | DAY YEAR / |
| Miami STREET ADDRESS FL 33/47 CHECKS \$ 2 | 300 . 00 |
| CITY STATE OF ZIP | 200 |
| 11 22 11 | 200 |
| FOR PAYMENT OF: Qualifying Fee - MDC Mayor | EF OF DEPARTMENT |
| DEPT .: _ Klection 5 BY: Al Completed and signed BY AUTHORIZED EMPLOY | DEPARTMENT. |
| FOR OFFICE USE ONLY | |
| Trans Subsidiary Index Code Subobject | AMOUNT |
| | |
| | |
| | |
| | |

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2024 JUN -4 PM 2: 34

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT