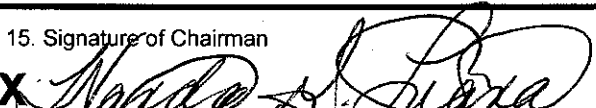


**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR POLITICAL  
COMMITTEES AND ELECTIONEERING  
COMMUNICATION ORGANIZATIONS**  
(Sections 106.011(1) and 106.021(1), F.S.)

OFFICE USE ONLY  
**RECEIVED**  
08 JAN 22 AM 9:58  
MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

**CHECK APPROPRIATE BOX:**

☒ Original Appointment of Treasurer      ☐ Reappointment of Treasurer      ☐ Deputy Treasurer

|   |  |  |                                 |
|---|--|--|---------------------------------|
| 1. Committee or Organization<br>Miami Dade Animal Rescue League   |  | 2. Account Number  | 3. Telephone<br>(305 ) 216-6119 |
| 4. Name of Treasurer or Deputy Treasurer<br>Eduardo Triana  |  | 5. Email (optional)  |                                 |
|   |  | 6. Telephone (optional)<br>(305 ) 216-6119                   |                                 |
| 7. Mailing Address<br>1628 N.E. 178 St., North Miami Beach, Florida 33162   |  |  |                                 |
| 8. Street Address<br>1628 N.E. 178 St. North Miami Beach, Florida 33162   |  |  |                                 |
| 9. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository |  |  |                                 |
| 10. Name of Bank<br>Gibraltar Bank  |  | 11. Street Address<br>450 East Las Olas Boulevard, Suite 180 |                                 |
| 12. City<br>Fort Lauderdale   |  | 13. State<br>Florida   | 14. Zip Code<br>33301           |
| 15. Signature of Chairman<br>                                      |  | 16. Name of Chairman (Print or Type)<br>WANDA G. TRIANA      |                                 |

**Campaign Treasurer's Acceptance of Appointment**

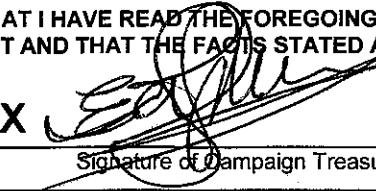
I, Eduardo Triana, do hereby accept the appointment as  
(Please Print or Type)  
treasurer or deputy treasurer for Miami-Dade Animal Rescue League  
(Committee or Organization)

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.

January 21, 2008

Date

X

  
Signature of Campaign Treasurer or Deputy 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 |
|-----------------|---|-----------------------------|
| Wanda G. Triana | 1628 N.E. 178 Street, North Miami Beach Florida 33162 | Chairpersom                 |

**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 | Mailing Address | Office Sought | Party |
|-----------|-----------------|---------------|-------|
| None      |                 |               |       |

**8. List Any Issues this Committee is Supporting:** None

List Any Issues this Committee is Opposing: County Ballot Question #3-slots

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

N/A

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

Returned to donors

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

| Name of Bank or Depository & Account Number | Mailing Address   |
|---|---|
| Gibraltar Bank                              | 450 East Las Olas Boulevard<br>Suite 180<br>Fort Lauderdale, FI 33301 |

**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 |
|--------------|----------------------------|-----------------------------|-----------------|
| None         |                            |                             |                 |

STATE OF Florida

Miami-Dade

COUNTY

I, Wanda G. Triana, certify that the information in this Statement of

Organization is complete, true and correct.

**X** 

Signature of Chairman of Political Committee

January 21, 2008.  
Date

RECEIVED  
08 JAN 22 AM 9:58  
MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

**STATEMENT OF ORGANIZATION  
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

**RECEIVED**  
OFFICE USE ONLY

08 JAN 22 AM 9: 58

MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

**1. Full Name of Committee**

Miami Dade Animal Rescue League

Telephone

305-216-6119

Mailing Address (include city, state and zip code)

1628 N.E. 178 Street, North Miami Beach, Florida 33162

Street Address (include city, state and zip code)

1628 N.E. 178 Street, North Miami Beach, Florida 33162

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

Name of Affiliated or  
Connected Organization

Mailing Address

Relationship

None

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

Miami Dade County

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

Animal Rights

**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

Eduardo Triana

1628 N.E. 178 Street, North Miami  
Beach, Florida 33162

Treasurer

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

**RECEIVED**  
OFFICE USE ONLY  
**08 JAN 22 AM 9:58**  
**MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT**



Original Appointment



Change of Appointment

**Registered Agent and Office Information**

Name **Eduardo Triana**

Telephone **305-216-6119**

Street Address **1628 N.E. 178 St.**

City **North Miami Beach**

State **Fl**

Zip Code **33162**

Mailing Address **1628 N.E. 178 St.**

City **North Miami Beach**

State **fl**

Zip Code **33162**

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 Division of Elections.

  
Signature of Registered Agent

January 21, 2008

Date

**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

**Miami Dade Animal Rescue League**

Street Address **1628 N.E. 178 St.**

Telephone **305-216-6119**

City **North Miami Beach**

State **fl**

Zip Code **33162**

Committee or organization is registered with:



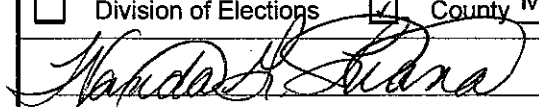
Division of Elections



County **Miami**



City

  
Signature of Chairperson

Wanda G. Triana

Print Name of Chairperson

January 21, 2008

Date