

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

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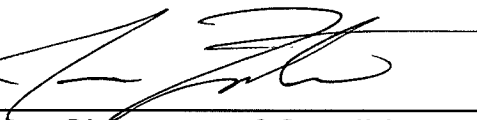
MIAMI-DADE
ELECTIONS

I, Juan C. Zapata ,

candidate for the office of County Commission, District 11 ;

have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X



Signature of Candidate

6/5/12

Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).



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

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Candidate/Chairperson:

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ELECTIONS

Juan

Carlos

Zapata

First Name

Middle Name

Last Name

County Commission, District 11

Office Sought / Organization

I acknowledge that it is my responsibility to read, understand and follow the requirements described in the following resources available on the Miami-Dade County Elections Department Website:

- Candidate Qualifying Handbook (<http://www.miamidade.gov/elections/candidate.asp>)
Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Qualifying Information, Electronic Reporting Dates and Procedures, Important Candidate Information, and Recent Legislative Changes.
- Political Committee Handbook (<http://www.miamidade.gov/elections/pacs.asp>)
Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Electronic Reporting Dates and Procedures, Important Committee Information, and Recent Legislative Changes.

Acknowledged by: _____

Candidate / Chairperson Signature

Date: _____

4/5/12

Primary Telephone Number: _____

305-593-2644

Alternate Telephone Number: _____

305-725-5820

E-mail address: _____

votezapata@gmail.com

**MIAMI-DADE COUNTY
CANDIDATE OATH –
NONPARTISAN OFFICE**

(For use by Mayoral, County Commission, Community Council and Property Appraiser Candidates)

OFFICE USE ONLY

Proof of residency provided:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Driver's License | <input type="checkbox"/> Utility Bill |
| <input type="checkbox"/> Voter Information Card | <input type="checkbox"/> Homestead Exemption Receipt |
| <input type="checkbox"/> Property Tax Receipt | <input type="checkbox"/> Lease Agreement |

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OATH OF CANDIDATE

(Section 99.021, Florida Statute and Section 12-11 of the Code of Miami-Dade County)

I, Juan C. Zapata
(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT - NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the nonpartisan office of County-Commission, 11
(OFFICE) (DISTRICT/AREA/SUBAREA)

I am a qualified elector of Miami-Dade County, Florida; I am qualified under the Constitution and the 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; 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 minimum residency requirements for this office, and am submitting proof of my residency in the district for the prescribed period. Under penalties of perjury, I declare that I have read the foregoing Oath of Candidate and that the facts stated in such are true.

X <u>[Signature]</u> Signature of Candidate	<u>(786)457-9636</u> Telephone Number	<u>votezapata@gmail.com</u> Email Address
<u>10610 SW 158 Ct. Apt. 105</u> Address	<u>Miami</u> City	<u>FL 33196</u> State Zip Code

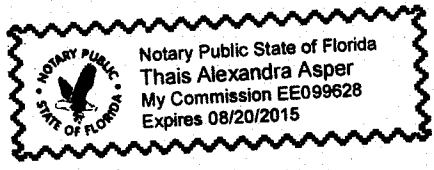
Candidate's Florida Voter Registration Number (located on your voter information card): 109275082

STATE OF FLORIDA
COUNTY OF miami-dade

Sworn to (or affirmed) and subscribed before me this 5 day of June, 2012.

Personally Known: X or
Produced Identification: _____
Type of Identification Produced:

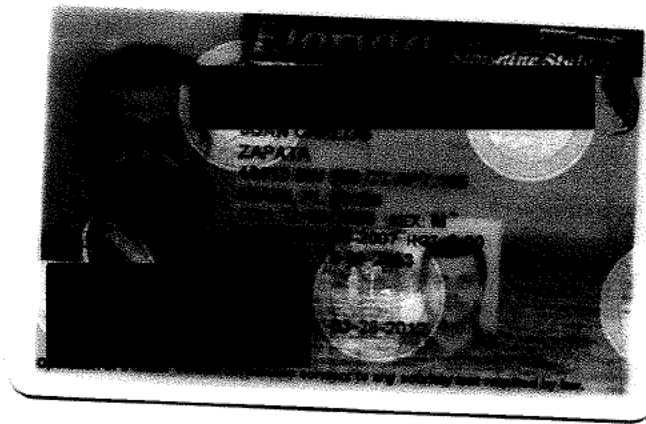
[Signature]
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



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FORM 6 FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTERESTS 2011

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

LAST NAME — FIRST NAME — MIDDLE NAME:
 Zapata Juan Carlos

MAILING ADDRESS:
 10610 SW 158 Ct. Apt. 105

Miami 33196 Miami-Dade
 CITY: ZIP: COUNTY:

NAME OF AGENCY:
 Miami-Dade County Commission, District 11

NAME OF OFFICE OR POSITION HELD OR SOUGHT:
County Commission District 11

CHECK IF THIS IS A FILING BY A CANDIDATE

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MIAMI-DADE
 ID Code ELECTIONS

ID No.

Conf. Code

P. Req. Code

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2011, 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 May 15, 20 12 was \$ 706,764.

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.

The aggregate value of my household goods and personal effects (described above) is \$ 110,000

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions page 4)	VALUE OF ASSET
Condo, 12925 SW 88 LN Miami, FL 33186	85,000
Regions Bank, Checking Account, PO Box 1107 Birmingham, AL 35288	5,585
Schwab Account, 101 Montgomery St. San Francisco, CA 94104	81,000
Schwab Account, 101 Montgomery St. San Francisco, CA 94104	42,000
(See Attached)	

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Regions Bank, Line of Credit, PO Box 1107 Birmingham, AL 35288	149,000

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
<i>n/a</i>	

PART D -- INCOME

You may **EITHER** (1) file a complete copy of your 2011 federal income tax return, including all W2's, schedules, and attachments, **OR** (2) file a sworn statement identifying each separate source and amount of income which exceeds \$1,000, including secondary sources of income, by completing the remainder of Part D, below.

I elect to file a copy of my 2011 federal income tax return and all W2's, schedules, and attachments.
 [If you check this box and attach a copy of your 2011 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
Zapata Consulting	PO Box 143751 Coral Gables, FL 33114	158,990
Investment Income	to be provided later	7,500

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 5]

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

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

OATH

STATE OF FLORIDA
 COUNTY OF Miami-Dade

Sworn to (or affirmed) and subscribed before me this 5 day of

June, 2012 by _____

[Signature]
 (Signature of Notary Public--State of Florida)

(Print, Type, or Stamp Commissioned Name of Notary Public)
 Notary Public State of Florida
 This Alexandra Asper
 My Commission EE099628
 Expires 08/20/2015
 Personally Known OR Produced Identification

[Signature]
 SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

Type of Identification Produced _____

FILING INSTRUCTIONS for when and where to file this form are located at the top of page 3.
INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.
OTHER FORMS you may need to file are described on page 6.

Part B--- Assests

Description of Assets	Value of Asset
IRA Vanguard Index Fund, PO Box 110 Valley Forge, PA 19482	33,200
Stock CDO Production (10%) 3399 NW 72 Ave Miami, FL 33122	40,000
Property, Unit 17, Golden Gate, Naples, FL	40,000
Greenback Investment- PO Box 143751 Coral Gables, FL 33114	20,000
Zap Holdings,LLC PO Box 143751 Coral Gables, FL 33114	40,000
401K, AXA Financial PO Box 8095 Boston, MA 02266	12,000
Florida Retirement System, PO Box 9000 Tallahassee, FL 32399	38,750
Secured Debt Investments Penn, LLC 2600 Douglas Rd.#905 Coral Gables, FL 33134 (6.5% ownership)	25,000
Checking Acct, J.P. Morgan Chase Bank, PO Box 659754 San Antonio, TX 78265	2,229
Blaze Media, 7035A SW 74 St. Miami, FL 33155 (10% ownership)	15,000
Zapata Consulting, PO Box 143751 Coral Gables, FL 33114	20,000
Pazos, Robaina, Zapata Management Group, 4909 SW 74 Ct. Miami, FL 33155 (33% ownership)	207,000
Ronald Medina, Loan, 5025 SW 75 St. Miami, FL 33143	40,000

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Addendum to Form 6:
Juan C. Zapata

I am receiving property that was left to me in my father's will. It's rural land in el Retiro, Colombia. I am not sure if the land has been transferred to me at this time; nor have I assessed its value.

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OFFICIAL RECEIPT
MIAMI-DADE COUNTY-FLORIDA

No. 6741232

RECEIVED FROM JUAN C. Zapata
ADDRESS 10610 SW 158 CT Apt 105
Miami CITY FL STATE 33194 ZIP
STREET ADDRESS

DATE 6 15 1 12
MONTH DAY YEAR
CASH \$ _____
CHECKS \$ 360.00

AMOUNT OF: Three Hundred and Sixty DOLLARS, AND NO CENTS TOTAL \$ 360.00

FOR PAYMENT OF: Qualifying Fee County Comm. Dist 11

THIS RECEIPT NOT VALID UNLESS DATED, COMPLETED AND SIGNED BY AUTHORIZED EMPLOYEE OF DEPARTMENT.

DEPT.: Elections By: MARIA ACOSTA

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TRANS	SUBSIDIARY	INDEX CODE	SUBJECT	AMOUNT

107.01-1 6/04

1106

JUAN C. ZAPATA CAMPAIGN ACCOUNT

CITY NATIONAL BANK
OF FLORIDA
MIAMI, FLORIDA 33172
63-436-660

6/4/2012

PAY TO THE ORDER OF Board of County Commissioners \$ ****360.00**
Three Hundred Sixty and 00/100 ***** DOLLARS

Board of County Commissioners
2700 NW 87th Avenue
Doral, FL33172



MEMO Qualifying Fee County Commission Dist. 11

Security features. Details on back.