

# STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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MIAMI DADE  
ELECTIONS

## 1. Full Name of Committee

Abre Los Brazos

Telephone

Mailing Address (include city, state and zip code)

344 W. 65 St., Hialeah, FL 33012

Street Address (include city, state and zip code)

344 W. 65 St., Hialeah, FL 33012

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

Name of Affiliated or  
Connected Organization

Mailing Address

Relationship

N/A

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

Recall of County Commissioners

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

Opposition to recall of County Commissioner Natacha Seijas

## 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

Daniel Hernandez

344 W. 65 St., Hialeah, FL 33012

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
Olga Ochoa	344 W. 65 St., Hialeah, FL 33012	Chairwoman

**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
N/A			

**8. List Any Issues this Committee is Supporting:** *N/A*

**List Any Issues this Committee is Opposing:** Recall of County Commissioner Natacha Seijas

**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?**

Donation to 501(c)(3) charity

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

Name of Bank or Depository & Account Number	Mailing Address
U.S. Century Bank Account No. [REDACTED]	<i>HIALEAH BRANCH 821 W - 49 ST HIALEAH, FL. 33012.</i>

**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
N/A			

STATE OF Florida ☒

Miami-Dade ☒

COUNTY

I, Olga Ochoa

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certify that the information in this Statement of

Organization is complete, true and correct.

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**X**

*Olga Ochoa*

Signature of Chairman of Political Committee

*11/12/10*  
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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CHECK APPROPRIATE BOX:

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☒ Original Appointment of Treasurer

☐ Reappointment of Treasurer

☐ Deputy Treasurer

1. Committee or Organization

Abre Los Brazos

2. Telephone

( )

3. Name of Treasurer or Deputy Treasurer

4. Email (optional)

Daniel Hernandez

5. Telephone (optional)

( )

6. Mailing Address

344 W. 65 St., Hialeah, FL 33012

7. Street Address

344 W. 65 St., Hialeah, FL 33012

8. The following bank has been designated as the

☒ Primary Depository

☐ Secondary Depository

9. Name of Bank

U.S. Century Bank

10. Street Address

821 - W - 49 - ST

11. City

HIALEAH

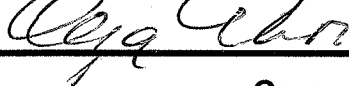
12. State

FL.

13. Zip Code

33012

14. Signature of Chairman

X 

15. Name of Chairman (Print or Type)

OLGA OCHOA

**Campaign Treasurer's Acceptance of Appointment**

I, Daniel Hernandez, do hereby accept the appointment as  
(Please Print or Type)

treasurer or deputy treasurer for

Abre Los Brazos

(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.

11/10/10  
Date

X   
Signature of Campaign Treasurer or Deputy Treasurer