CITY OF CORAL GABLES CERTIFICATE OF QUALIFICATION GENERAL BIENNIAL ELECTION APRIL 8, 2025

NSP LEB IB HWIT: 40 LA CLERKS OFFICE

STATE OF F	LORIDA))SS	
COUNTY OF	FMIAMI-DADE)	
	oy certify that <u>FEUX PARDO</u> has filed in Gr for the Office of <u>COMMISSIONER</u> in the City of Coral Gable	
Biennial Elec	tion to be held on April 8, 2025, and he/she has paid the Qualifyin	g Fee and
Election Asse	ssment and has also submitted the documents listed herein below:	
4	City Qualifying Filing Fee for seat on Commission*	\$200.00
	State Assessment Fee for Mayor Group I (Municipal Candidates; Elections Assessment)	\$709.80
,	One (1) percent of the annual salary (\$70,980) of the office sought	
rs/	State Assessment Fee for Commissioner Group II (Municipal Candidates; Elections Assessment) One (1) percent of the annual salary (\$66,866) of the office sought	\$668.66
	State Assessment Fee for Commissioner Group III (Municipal Candidates; Elections Assessment) One (1) percent of the annual salary (\$66,865) Of the office sought	\$668.66
4	Form 1: Statement of Financial Interests	
2/	Loyalty Oath / Oath of Candidate	
4	Biography / Resume	
ø	Designation of Campaign Depository/ Appointment of Campaign Qualified Elector, Citizenship and Residency affirmation form	n Treasurer Form,

PEER IS WATT: 4T

Declaration of Candidate Intent

Statement of Candidate

Proof of Residency

- Proof of Citizenship
- Acknowledgement by Candidates covered by the Mandatory Provision of the Miami-Dade Ethical Campaign Practices Ordinance
- □ Voluntary Statement of Campaign Practices
- ☐ Letter of Resignation (If applicable in Accordance with Resign to Run Law)

Received by

Date:

Billy Y. Urquia Supervisor of Elections for Coral Gables, Florida

(Type of Identification)

My commission expires

DESIREE LIGUORI
Notary Public - State of Florida
Commission # HH 109536
My Comm. Expires Mar 28, 2025
Bonded through National Notary Assn.

Commission Name of Notary Public)

*Note: If candidate cannot pay the filing fee of \$200.00 then candidate has to fill out Undue Burden Oath: Filing Fee Form.

Filed with COE: 02/18/2025

General Information

Name:

Mr Felix Pardo

PID 293162

AGENCY INFORMATION

Organization Suborganization Title

Coral Gables Planning Board

CANDIDATE FOR

Position Agency Name

City, Town or Village (Commission or Council), Governing Board - Form 1

(Effective 6/10/2024)

Coral Gables

Position sought or held

Coral Gables Commissioner Group2

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2024.

Primary Sources of Income

PRIMARY SOURCE OF INCOME (Over \$2,500) (Major sources of income to the reporting person) (If you have nothing to report, write "none" or "n/a")

Name of Source of Income	Source's Address	Description of the Source's Principal Business Activity
Felix Pardo & Associates, Inc.	2100 Salzedo Street, Suite 303 Coral Gables, FL 33134	Architectural Firm

Filed with COE: 02/18/2025

Secondary Sources of Income

SECONDARY SOURCES OF INCOME (Major customers, clients, and other sources of income to businesses owned by the reporting person) (If you have nothing to report, write "none" or "n/a")

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
N/A		W. C. St. St. St.	

Real Property

REAL PROPERTY (Land, buildings owned by the reporting person) (If you have nothing to report, write "none" or "n/a")

Location/Description

200 Seahorse Court, Marco Island, FL 34145

Intangible Personal Property

INTANGIBLE PERSONAL PROPERTY (Stocks, bonds, certificates of deposit, etc. over \$10,000) (If you have nothing to report, write "none" or "n/a")

Type of Intangible	Business Entity to Which the Property Relates	
N/A		

2024 Form 1 - Statement of Financial Interests

Filed with COE: 02/18/2025

Liabilities

LIABILITIES (Major debts valued over \$10,000): (If you have nothing to report, write "none" or "n/a")

Name of Creditor	Address of Creditor	
US Bank	800 Nicollet Mall Minnesota, MN	

Interests in Specified Businesses

INTERESTS IN SPECIFIED BUSINESSES (Ownership or positions in certain types of businesses) (If you have nothing to report, write "none" or "n/a")

Business Entity # 1

N/A

Training

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you for this form year.

Filed with COE: 02/18/2025

Signature of Filer

Felix Pardo

Digitally signed: 02/18/2025

Filed with COE: 02/18/2025

CANDIDATE OATH NONPARTISAN OFFICE (Do not use this form if a Judicial or School Board Candidate) Check box only if you are seeking to qualify as a write-in OSE LEB 18 PHII: 4I candidate: Write-in candidate OFFICE USE ONLY **Candidate Oath** Name to appear on ballot: Felix Pardo Check box if two last names without hyphen. (Name cannot be changed after qualifying.) Check box if name includes nickname. (For use of a nickname, you must complete the Nickname Affidavit on reverse side.) I swear or affirm that I am a candidate for the nonpartisan office of Coral Gables Commissioner (District #) ____; I am a qualified elector of Miami-Dade County, Florida I am a qualified elector under the Constitution and the Laws of Florida 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. Statement of Outstanding Fines, Fees, or Penalties I owe outstanding fines, fees, or penalties, that cumulatively exceed \$250, for ethics or campaign finance violations (s. 99.021(1)(d), F.S.). YES, I Do_____ NO, I Do Not X If you do, you must also specify the amount owed and each entity that levied the same on the reverse side. (305)778-7234pardoarch@comcast.net Signature of Candidate Telephone Number Email Address 421 Cadima Avenue **Coral Gables** 33134 FL Address of Legal Residence City State ZIP Code STATE OF FLORIDA COUNTY OF Miami Dade Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below: Sworn to (or affirmed) and subscribed before me by means of online notarization OR physical presence this 18th day of February, 2025 LOURDES M. CORONA MY COMMISSION # HH 141962 EXPIRES: October 9, 2025 Personally Known OR Produced Identification Bonded Thru Notary Public Underwriters Type of Identification Produced:_ DS-DE 302NP (Eff. 10/2023)

Rule 1S-2.0001, F.A.C.

Felix Pardo, AIA, ASID, CSI

Registration: Architect State of Florida

Registered 1979

Owner of Felix Pardo & Associates, Inc.

Service to the Community:

City of Coral Gables 40 Years of Service

Coral Gables Board of Architects (Former Chairman)

Coral Gables Board of Adjustments (Served Twice)

Coral Gables Cultural Grants Board (Former Chairman)

Coral Gables Planning Board (Past Chairman/Served Twice)

Coral Gables Parks and Recreation Board

Construction Regulation Board

Charter Review Committee

Mediterranean Bonus Blue Ribbon Committee (Former Chairman)

Coral Gables Trial Board

Coral Gables Magistrate

North Gables Apartment District Blue Ribbon Committee

Community 40 Years of Service

Dade Heritage Trust Trustee

Boy Scout Troop 16 (Former Chairman)

Our Lady of Lourdes (Parent Advisory Board)

40 Year member of the Coral Gables Rotary Club (Former President)

University of Miami Architectural Alumni Association (Former Director)

SOSPEED TO HATT: 4S CILLA CEEKLE DEFICE

Professional Experience and Affiliations

Registered Architect for 46 years and owner of FPA

American Institute of Architects

Construction Specifications Institute

American Society of Interior Designers

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the filing officer before

SOSE 1997 S3 HKTT: 47 SITY CLERK'S OFFICE

opening the campaign account.				[14,61]		2 30 1 5	OFFICE USE ONL'
1. CHECK APPROPRIATE BO	X(ES):					76.1.17	
☑ Initial Filing of Form ☐ Re	e-filing to Change:	Treasure	er/Depu	ty 🗆 De	pository	☐ Offic	e 🗆 Party
2. Name of Candidate (in this (Please Print of	order: First, Middle, Las or Type Name)	t):	3. Add	Iress (include	PO Box	or Street, Ci	ity, State, Zip Code):
FELIX PARDO				-1 CADI PAL GI			33134
4. Telephone:	5. Candidate's Voter	Registrat		6. Email Ad		3, 10	
(305) 778-7234	(not required for qualif	1.7				HCG	OMCAST. He1
7. Office Sought (include district COPAL GABLES			if a	If a candida applicable: I intend to ru			office, check the bo
9. If a candidate for partisan of	ffice, check the box ar	nd fill in tl	he nam	e of the part	y as app	licable: I into	end to run as a
☐ Write-In Candidate. ☐ No	Party Affiliation Candid	date.					Party candidate.
10. I have appointed the follo	wing person to act as	my:	Camp	aign Treasur	er	☐ Deput	y Treasurer
11. Name of Treasurer or De	outy Treasurer:	1 - 2 -	12. Te	lephone:		13. Email	Address:
CARLOS DE LA	OSA		(305	1273-1	040	CAPLOS _	SR @ DELHOSACP
14. Mailing Address:		15. City			16. Sta		17. Zip Code:
267 MINORCA AU	B , SUITE 200	CORA	LGA	ibles,	杠		33134
18. I have designated the fol	lowing bank as my (ch	eck appro	priate l	oox): 🗹 Prim	ary Depo	sitory 🗌 S	Secondary Depository
19. Name of Bank: CITY HATIO!	HAL BANK		20. A	ddress: 2855	9. L	BJUBH	BRP
21. City: COPAL GAPLI	35	22. Cot		PAPE	23. Sta	ate:	24. Zip Code: 33134
UNDER PENALTIES OF PER CAMPAIGN TREASURER AND							
25. Date: 1/22/2026			THE R. P. LEWIS CO., Lawrence, Brillians, Br	ignature of	4519	The second second second	
27. Treasurer's Ac	cceptance of Appointm	nent (fill in	the bla	nks and chec	k the app	ropriate box	()
I, CARLOS DE LA (Please Print	OSA or Type Name)		_do he	reby accept the	he appoir	ntment desig	nated above as:
	Campaign Treasurer			☐ Deputy 1	Treasurer	•	
28. Date: 1/22	/2025		29. S	ignature of C	Campaigi	Treasurer	or Deputy Treasure
DS-DE 9 (Rev. 09/23)		0.000				R	ule 1S-2.0001, F.A.C.

SOSPEEBIB HOUTH

2025 GENERAL BIENNIAL ELECTION DECLARATION OF CANDIDATE INTENT,

OHALIEIED ELECTOD AND DESIDENCY AFEIDMATION

QUALIFIED ELECTOR AND RESIDENCY AFFIRMATION
State of Florida
County of MIAMI DADE
City of CORAL GABUSS
I, FOUX PAPEM qualified elector and resident of COPAL CABLES
declare that I have been a continuous Coral Gables resident for at least a year proceeding the
qualifying period.
I further declare that I am a candidate for COMMISSIONER GROUP III (Office) (Group Number) in the General Biennial Election of 4-8-115, and do hereby file my intent to run in
in the General Biennial Election of $\frac{4-9-115}{\text{(Month/Date/Year)}}$, and do hereby file my intent to run in
said election, and to pay the required qualification fee and election assessment in connection with
same. (Attach proof of residency and qualified elector documentation).
UNDER PENALTIES OF PERJURY, I HEREBY DECLARE THAT I HAVE READ THE
FOREGOING DECLARATION OF INTENT FORM AND THAT THE FACTS STATED
ARE TRUE.
SIGNATURE 18 FOR 25

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

SOSP 18W SS WHIT: 41

candidate for the office of CORAL CAPLES COMMISSIONER II
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X Signature of Candidate Da

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).



PROPERTY APPRAISER OF MIAMI-DADE COUNTY

Summary Report

Generated 0m 02/10/2025

Folio	03-4117-004-1480
Property Address	421 CADIMA AVE CORAL GABLES, FL 33134-7147
Owner	FELIX PARDO &W LYNN G
Mailing Address	421 CADIMA AVE CORAL GABLES, FL 33134-7147
Primary Zone	0100 SINGLE FAMILY - GENERAL
Primary Land Use	0101 RESIDENTIAL - SINGLE FAMILY : 1 UNIT
Beds / Baths /Half	4/3/0
Floors	1
Living Units	1
Actual Area	2,807 Sq.Ft
Living Area	2,378 Sq.Ft
Adjusted Area	2,545 Sq.Ft
Lot Size	10,000 Sq.Ft
Year Built	Multiple (See Building Info.)

ASSESSMENT INFORMATION			
Year	2024	2023	2022
Land Value	\$1,019,844	\$749,760	\$669,672
Building Value	\$321,263	\$322,016	\$322,770
Extra Feature Value	\$1,695	\$1,708	\$1,720
Market Value	\$1,342,802	\$1,073,484	\$994,162
Assessed Value	\$357,747	\$347,328	\$337,212

BENEFITS INFORMATION)N			
Benefit	Туре	2024	2023	2022
Save Our Homes Cap	Assessment Reduction	\$985,055	\$726,156	\$656,950
Homestead	Exemption	\$25,000	\$25,000	\$25,000
Second Homestead	Exemption	\$25,000	\$25,000	\$25,000

Note: Not all benefits are applicable to all Taxable Values (i.e. County, School Board, City, Regional).

SHORT	LEGAL	DESCRIPTION	

17 54 41 PB 20-1

CORAL GABLES COUNTRY CLUB SEC 6

LOTS 17 & 18 BLK 130

LOT SIZE IRREGULAR

OR 14457-2385 0290 1

	Generale Uni UZI TUIZUZO
ALEDO AVE	953
CADIMA AVE	N
	20. Aepa) F ygraphy.

COUNTY	\$50,000	# 50,000	\$50,000
Exemption Value	\$50,000	\$50,000	\$50,000
Taxable Value	\$307,747	\$297,328	\$287,212
SCHOOL BOARD			
Exemption Value	\$25,000	\$25,000	\$25,000
Taxable Value	\$332,747	\$322,328	\$312,212
CITY			
Exemption Value	\$50,000	\$50,000	\$50,000
Taxable Value	\$307,747	\$297,328	\$287,212
REGIONAL			
Exemption Value	\$50,000	\$50,000	\$50,000
Taxable Value	\$307,747	\$297,328	\$287,212
SALES INFORMATION			
Previous Sala Price	OR Book-	Qualification	

SALES INFORMATION				
Previous Sale	Price	OR Book- Page	Qualification Description	
02/01/1990	\$185,000	14457-2385	Sales which are qualified	

The Property Appraiser is continually editing and updating the tax roll. This website may not reflect the most current information on record. The Property Appraiser and Miami-Dade County assumes no liability, see full disclaimer and User Agreement at http://www.miamidade.gov/info/disclaimer.asp

FELIX PARDO FOR CORAL GABLES COMMISSIONER ACCOUNT

267 MINORCA AVE STE 200 CORAL GABLES, FL 33134 DATE 02 /18/25

63-436/660 @CHECK-4850

1001

PAY TO THE ORDER OF CITY OF CORM GABLES

\$ 868 .66

EIGHT HUMSTES SIXTY-EIGHT AUS

DOLLARS

City National Bank

FOR CANDIDETT QUALIFICATION

RECEIVED FROM Felix Pardo \$868-66

Eight Hundreds Sixty Eight 66 as DOLLARS
OFOR RENT Qualifying Fees

ACCOUNT CHECK FROM TO

BALDUE ORDER CREDIT ALLOW WE CREDIT