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SEP 01 2016

CITY OF NORTH MIAMI  
CITY CLERKS OFFICE

### LOBBYIST REGISTRATION AFFIDAVIT

1. Lobbyist Name: DELLAGLORIA JOHN CASTLE  
Last name First Middle

Business phone 305 431-0704

Mailing Address P.O. Box 560333 Miami FL 33176  
City State Zip

2. Principal Represented: ELIZAN

Principal's Address 2618 N.E. 191<sup>st</sup> H. Miami, FL Zip 33180  
(If different from above)

Other Principals or Interests and Address (Detail):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Subject Matter (Describe in detail):  
Purchase of Chamber of Commerce & City Parky lot  
on N.E. 131<sup>st</sup> H

Lobbyist specifically includes principal as well as any agent, officer or employee of a principal. Each person who withdraws as a lobbyist is required to file a Certificate of Withdrawal.

4. Registration Fee paid? Yes  No  (Cash  or Check   
Certificate of Withdrawal filed? Yes  No

5. Please identify all Council people or Personnel to be lobbied: CP&D Staff, City  
Manager, City Attorney, Planning Board, City Council

6. The subject matter in number (3) above is to be considered at a meeting of: (check all applicable)
- The City Council
  - Zoning Board of Adjustment
  - Planning Commission
  - Other City Board
  - RFP Review/Selection Committee
  - Others (Specify)



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7. Please state the extent of any business, financial, familial, professional or other relationship which exists with any individual identified in number five above.

NONE

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

OATH

STATE OF FLORIDA )  
COUNTY OF MIAMI-DADE )

I, the undersigned registrant, do hereby depose under oath and say that the information disclosed and any attachments are true and correct.

[Signature]  
Signature

Sworn to and subscribed before me this 1 day of September, 2016.

[Signature]  
Notary Public

My Commission Expires:

